

FEDERALLY ENFORCEABLE DISTRICT-ORIGIN OPERATING PERMIT–TYPE I APPLICATION



***Air Pollution Control District of
Jefferson County, Kentucky***

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REQUIRED COMPONENTS OF A FEDERALLY ENFORCEABLE DISTRICT-ORIGIN OPERATING PERMIT (FEDOOP) TYPE 1 APPLICATION

Jefferson County Air Pollution Control District

This permit application is composed of eighteen forms, labeled 9420-A to 9420-R. These forms must be completed in their entirety for this application to be deemed complete.

1. Form 9420-A: **Administrative Information:** This form will provide the necessary source information and must be signed by a responsible official.
2. Form 9420-B1 through Form 9420-B4: **Emissions Unit Information:** This form should be used for each emission unit, and for each alternative operating scenario. Multiples of this form may be necessary for each emission unit.
3. Form 9420-C1 through 9420-C7 and 9420-C10: **Control Devices:** Complete the appropriate form for each control device. Form 9420-C8 & 9420-C9: **Non-Controlled Emissions and Fugitive Emissions:** Complete these forms for each point that is not covered by Forms 9420-C1 through 9420-C7.
4. Form 9420-D: **Alternative Operating Scenarios:** This form should be used to identify alternative operating scenarios associated with an emission unit.
5. Form 9420-E: **Emissions Data:** This form should be used to list emission rates of all regulated air pollutants for each emission unit and for all operating scenarios associated with an emission unit.
6. Form 9420-F: **Stack Height Determination Information:** Complete one form for each stack.
7. Form 9420-G: **Emissions Calculations:** Supporting calculations must be supplied on this form for all emissions data submitted with this permit application.
8. Form 9420-H: **Emissions Summary:** This form shall be used to summarize plantwide emissions for all regulated air pollutants.
9. Form 9420-I: **Applicable Requirements:** Applicable federal and/or District regulations governing emission standards and limitations, recordkeeping, reporting, monitoring, and testing must be stated.
10. Form 9420-J: **Insignificant Activities Summary:** Summary of emission units which are exempt from the applicable regulations.
11. Form 9420-K: **Compliance Monitoring Devices and Activities:** Complete one form for each applicable emission unit.
12. Form 9420-L: **Compliance Status:** The compliance status of each emission unit must be stated.
13. Form 9420-M: **Compliance Schedule:** This form shall be completed for each emission unit which is not in compliance with all applicable requirements at the time of permit issuance.
14. Form 9420-N: **Certified Progress Report:** This form shall be completed for each item of equipment being operated in accordance with Form 9420-M.

REQUIRED COMPONENTS OF A FEDERALLY ENFORCEABLE DISTRICT-ORIGIN APPLICATION (cont.)

15. Form 9420-O: **Compliance Certification:** This form must be submitted with the original application and with each annual report. It must be signed by a responsible official.
16. Form 9420-P: **Section 112(r) Risk Management Plan:** This form must be submitted with the initial permit application.
17. Form 9420-Q: **Emission Reduction Credit:** This form is to be submitted when an ERC is claimed after a federally enforceable District-origin operating permit has been issued.
18. Form 9420-R: **Episode Standby Plan:** These forms are to be submitted by all major emitters.

INSTRUCTIONS FOR FORM 9420-A

ADMINISTRATIVE INFORMATION

Type of Application

Check the appropriate box(es).

LEGEND:

INI	Initial Application	REL	Relocation
REP	Replacement	CPC	Change of Permit Condition
OWN	Change of Ownership	REV	Permit Revision

Initial Application (INI) – Application is submitted pursuant to receiving written notification from the District that the **FEDERALLY ENFORCEABLE DISTRICT-ORIGIN** permit program has been approved by the EPA and that the source must submit an application to revise its existing operating permit to conform to the **FEDERALLY ENFORCEABLE DISTRICT-ORIGIN** requirements.

Replacement (REP) - The replacement of existing permitted equipment with equipment of the same size, type, and function that does not result in an increase in emissions of regulated air pollutants, and that does not affect the compliance status.

Change of Ownership (OWN) - Self-explanatory.

Relocation (REL) - Notification to the District that an emission unit will be moved from one physical location to another within a source with no resultant changes to the process or to emission rates. Additional information will be required if the relocation of an emission unit in any way influences a previous modeling compliance demonstration performed for the relocated emission unit or for any part of the source to which the emission unit is being relocated.

Permit Revision (REV) - Permit revisions are defined in Section 6 of District Regulation 2.17 and should be reviewed by the applicant prior to preparing an application.

Change of Permit Condition (CPC) - Request for change of a permit condition which cannot be classified in any of the categories above.

ADMINISTRATIVE INFORMATION (cont.)

Source Information

- 1) Enter the full business name of plant (the name to which the permit will be issued).
- 2) Street address at which the source is located.
- 3) - 6) Complete with appropriate information. Note: The SIC Code is the Standard Industrial Classification which can be found in the Standard Industrial Classification Manual. If there are multiple processes at the source which have different SIC codes, list the code or codes which best represent the primary activity at the source. A copy of the SIC codes is available for reference at the District office.
- 7) - 8) Person at the plant who may be contacted for questions about the permit application.

Owner Information

- 9) Can be an individual or the parent company.
- 10) This is the mailing address of the parent company.
- 11) - 13) Complete with the appropriate information.
- 14) Individual who is authorized to act on behalf of the owner.

Operator Information

- 15) - 19) Complete this section if the operator is not the owner of the plant.

Applicant Information

- 20) - 21) Check the appropriate boxes.
- 22) Name and title of person to whom written correspondence should be addressed.
- 23) - 24) Enter the name of the person designated to answer technical questions.

Supporting Documents

- 25) Check pertinent items.

Corporate/Company Ownership

- 26) List any and all persons and organizations which have a five percent (5%) or more interest in the company.

Signature Block

- 27) The application must be signed by a responsible official of the source and dated. In general, a responsible official is as follows:
For a corporation:
 - Corporate officer
 - Other person in charge of a principal business function
 - Duly authorized representative responsible for overall operation of a source (plant manager) if either:
 - 250 persons employed or \$25 million in sales or expenditures
 - Delegation of authority approved in advance
For a partnership: A general partner.
For a sole proprietorship: The proprietor
For a government agency:
 - Principal executive officer
 - Ranking elected official

FEDERALLY ENFORCEABLE DISTRICT-ORIGIN OPERATING PERMIT APPLICATION

Jefferson County Air Pollution Control District
850 Barret Avenue, Suite 205, Louisville, Kentucky 40204-1755
ADMINISTRATIVE INFORMATION FORM 9420-A

The completion of this form is required under District Regulation 2.17. Applications are incomplete unless accompanied by copies of all plans, specifications, and drawings requested herein. Failure to supply information required or deemed necessary by the District to enable it to act upon the application shall result in denial of the permit and ensuing administrative or legal action.

TYPE OF APPLICATION:		
<input type="checkbox"/> INI	<input type="checkbox"/> OWN	<input type="checkbox"/> CPC
<input type="checkbox"/> REP	<input type="checkbox"/> REL	<input type="checkbox"/> REV

FOR DISTRICT USE ONLY	
EIS NO.:	PERMIT NO.:
DATE RECEIVED:	/ /
DETERMINATION DATE:	/ /

SOURCE INFORMATION			
1) Source (Facility) Name:			
2) Source Street Address:			
3) City:			4) ZIP + 4:
2a) Source Mailing Address:			4a) ZIP + 4:
5) Primary Standard Industrial Classification (SIC) Description:		6) Primary 2-digit SIC No.:	
		6a) OR Primary NAICS No.:	
7) Source's Environmental Contact Person:		8) Contact Person's Telephone No.: () -	
		8a) Contact Person's E-Mail Address:	
OWNER INFORMATION			
9) Name:			
10) Address:			
11) City:		12) State:	13) ZIP + 4:
14) Owner's Agent (if applicable):			
OPERATOR INFORMATION			
15) Name:			
16) Address:			
17) City:		18) State:	19) ZIP + 4:
APPLICANT INFORMATION			
20) Who is the applicant? <input type="checkbox"/> Owner <input type="checkbox"/> Operator		21) All correspondence to (check one): <input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Source	
22) Attention name and title for written correspondence:			
23) Technical contact for submittal of application:		24) Contact Person's Telephone No.: () -	
		24a) Contact Person's E-Mail Address:	

ADMINISTRATIVE INFORMATION FORM (cont.)

25) Check other attachments which are part of this application:

☐ Material Safety Data Sheets (MSDS)

☐ Stack Test Reports

☐ Claim of Confidentiality

☐ Other (Specify): _____

26) List names of owners and officers of company who have an interest in the company of five percent (5%) or more (attach another sheet if necessary):

Name

Position (owner, partner, president, etc.)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

SIGNATURE BLOCK FOR RESPONSIBLE OFFICIAL

27) Based on information and belief formed after reasonable inquiry, I certify that the statements and information in this document are true, accurate, and complete.

BY:

_____/_____/_____
Authorized Signature Date

Typed or Printed Name of Signatory Title of Signatory

Representing: ☐ Owner ☐ Operator

INSTRUCTIONS FOR FORM 9420-B

EMISSION UNIT

Definitions:

EMISSION UNIT – A "part" or "activity" within a source which has one or more emission points. An emission unit may have one or more pieces of equipment which are related by their production purpose. The emission unit is sometimes referred to as an "affected facility" or "process" in the District Regulations. An emission unit may be any of the following:

- An emitting point that can be individually controlled: e.g., a boiler or a paint booth.
- The smallest grouping of emission points that, when collected together, can be commonly controlled by a single control device or work practice.
- Any grouping of emission points that, when collected together, can be commonly controlled by a single control device or work practice.
- A grouping of emission points that are functionally related.

Equipment is functionally related if the operation or action for which the equipment was designed could not occur without being connected to, or without relying on the operation of, another piece of equipment.

EMISSION UNIT ID # – This is the unique ID number which the company has assigned to an emission unit. This number shall be with the capital letter "U" followed by a number. The numbers shall start with "1" and shall be assigned consecutively throughout the plant, using steps of 1.

EMISSION POINT – A part of an emissions unit for which there is an emission standard and emits, or has the potential to emit, regulated air pollutants. For example, an emission point may be a boiler, a reactor vessel, a storage tank, or a printing press.

EMISSION POINT ID # – This is the unique ID number which the company has assigned to an emission point. This number shall be prefixed with the capital letter "E" followed by a number. Number the emission points consecutively, starting with the number "1", using steps of 1. This number must be unique for each point. Do not start over with E1 when starting to list a new emissions unit.

FUGITIVE EMISSIONS – Fugitive Emissions are emissions of regulated air pollutants associated with an emission point, but are not captured and exhausted through a stack or vent. Fugitive Emissions can be quantified either by determining the amount of uncaptured emissions at a point of capture, by mass balance, or by emission factors. Fugitive emissions shall be accounted for as an assigned emission point with an associated emission point ID number.

INSTRUCTIONS FOR FORM 9420-B1 EMISSION UNIT

EMISSION UNIT NAME – Enter the company designated name for the Emission Unit, such as Boiler #6, or Flaker Line 2. This name must be entered exactly the same way each time it is referenced in the permit application.

Example - Boiler #6 must not be referred to later as Process Boiler 6.

EMISSION UNIT # – This is the unique number which the company has assigned to an Emissions Unit. This number shall be prefixed with the capital letter "U" followed by a number. The numbers shall start with "1" and shall be assigned consecutively throughout the plant, using steps of 1.

Example - U1, U2, . . . U53, not U2.5.

EIS # – This number is assigned to the company by the District. If you do not know your EIS number, contact the District.

EMISSION UNIT DESCRIPTION – Provide a short description to describe this Unit.

Example - "spent grain dryer" or "casing and cutting line" or "Pb-Acid Battery Mfg - Grid Casting Line."

SIC CODE – Enter the four-digit SIC Code for this Emission Unit.

CONTINUOUS / BATCH – Enter the appropriate designation for this Emission Unit.

A **continuous process** has a continual flow of material entering and exiting the process. Usually, continuous transfer, conveyORIZED, or station-to-station assembly line type operations are considered continuous processes.

In a **batch operation**, the materials enter the process at one time. There is usually a holding time required to allow extensive mixing or to allow a chemical reaction to occur.

OPERATING SCHEDULE

Normal Enter the actual hours/day, days/week, weeks/year that this Emission Unit is expected to be in operation.

Maximum Enter the schedule that reflects the maximum time you propose to operate this Emission Unit. Keep in mind that the Emission Unit will have permit conditions limiting its operation to whatever amount is listed here.

Example - If normally the schedule is 8 x 5 x 52, but in the Summer the process is run on 4 hours of overtime a day and one shift on Saturday, then in this section you would enter:

Monday - Friday 12 hrs/day, 5 days/wk, 12 wks/yr
Sat. - Sun. 8 hrs/day, 1 day /wk, 12 wks/yr

SEASONAL VARIATION

Enter the percent of the total annual throughput for this Emission Unit for each quarter.

Example - If the Unit only operated during June, then the Apr. - Jun. block would have 100%.

Example - If 80% of the throughput is in April - Sept., then enter:

Jan. - Mar. 10% Apr. - Jun. 40% Jul. - Sep. 40% Oct. - Dec. 10%

RAW MATERIALS, Type and Units

Type: Identify each material or product going into the process. Exclude the combustion of fuels. Be as specific as possible without going into the constituent level for compounds.

Example - tobacco, lead oxide, sand, asphalt, paints, diluents, formaldehyde.

Units: Enter the units by which each material is measured into the process. If any unit other than weight is used, please indicate in this section how to convert the unit to weight.

Example - lbs., tons, square feet, cubic feet, gallons.

EMISSION UNIT (cont.)

PRODUCTS, Type and Units

Type: Identify each type of product which is produced by this emissions unit.

Example - painted wooden doorknobs, wooden cabinet panels - cut to length, extruded vinyl strips, steam, crushed rock, printed cardboard boxes, phenolic resins.

Units: Enter the units by which each product is measured.

Example - gallons, feet, lbs.

PROCESS DESCRIPTION

Describe what is taking place at the Emission Unit.

Example - Tobacco is conveyed to a conditioning drum where moisture is added. There are hoods to collect dust from the conveyor and dust pickup points at the entrance to the conditioning drum.

FUELS

Emission Point #: If there is fuel consumed as part of this Emission Unit, enter the Emission Point I.D. # associated with this fuel use.

Type: Enter the type of both primary and backup fuel for each Emission Point.

BTU/unit: Enter the heating value of the fuel in BTU per unit of measurement. *Example: 140,000 BTU per gallon.*

Normal Usage: Enter the actual usage per year of this fuel under normal operating conditions.

Maximum Usage: Enter the maximum usage per year of this fuel that you propose to burn in a year. There will be permit limits restricting fuel usage to this amount, and requirements to record and report the amounts to verify that no limits are exceeded.

Sulfur %: Enter the percent Sulfur of the fuel.

Ash %: Enter the percent ash of the fuel.

EMISSION UNIT

Emission Unit Name _____ Emission Unit ID# _____ EIS # _____

Emission Unit Description:			
SIC Code:		Continuous / Batch:	
OPERATING SCHEDULE		Hours/Day	Days/Week
Normal (Monday - Friday)			Weeks/Year
(Sat. and Sun.)			
Maximum (Monday - Friday)			
(Sat. and Sun.)			
SEASONAL VARIATION (%)		Jan. - Mar.	Apr. - Jun.
		Jul. - Sep.	Oct. - Dec.
RAW MATERIALS, Type and Units			
PRODUCTS, Type and Units			
PROCESS DESCRIPTION			
FUEL		EMISSION PT #	
		PRIMARY	SECONDARY
Type			
BTU/Unit			
Norm. Usage			
Max. Usage			
Sulfur %			
Ash %			

INSTRUCTIONS FOR FORM 9420-B2 EMISSION UNIT

EMISSION UNIT NAME, EMISSION UNIT ID #, EIS

Enter these exactly as they were assigned in Form 9420-B1.

EMISSION POINT ID

This is the unique ID number which the company has assigned to an emission point. A point may be an area or point of fugitive emission, i.e. coal stock piles, haul roads, aboveground storage vessels, etc. This number shall be prefixed with the capital letter "E" followed by a number. Number the emission points consecutively, starting with the number "1", using steps of 1. **This number must be unique for each point. Do not start over with E1 when starting to list a new Emission Unit.**
Example - Emission Unit Number U30 contains the Emission Points E1, E2 and E3, and Emission Unit Number U31 has Emission Point Numbers E4 and E5.

EMISSION POINT DESCRIPTION

Describe the point, including a company designated ID for the point.
Example - Stainless steel reactor vessel (R105), Scalper screens (screen one), Spray paint booth (Booth 3), printing press (Old Heady), grinder, extruder.

MAKE

Enter the make of the equipment. If the equipment was built in-house, enter that. If the Emission Point is not associated with a piece of equipment, i.e., clean-up room where chemicals are used to wipe off screens or parts, then leave Make and Model blank.

MODEL

Enter the Model number of the equipment, if applicable.

MAXIMUM RATED CAPACITY

Enter the manufacturer's maximum rated capacity for the equipment per hour.
Example - A paint spray gun may have 3 gallons/hour, a press may have 1500 sheets/hour, a boiler may have maximum input capacity of 38 MM Btu/Hr.

INSTALLATION DATE

Enter the date the equipment was installed.

CONTROL ID

This is the unique ID number which the company has assigned to each control device. This number shall be prefixed with the capital letter "C" followed by a number. Number the control devices consecutively, starting with the number "1", using steps of 1.
Example - C1, C2, . . . C23.

If this emissions unit vents to a control device, enter the Control I.D. number which has been assigned to the device. If the control used is a series of devices, such as a cyclone that vents to a baghouse, then enter all appropriate ID numbers in the order that the gas stream enters them. Not all emission points will have a control; enter "NA" if the emission point does not employ a control device.

STACK ID

This is the unique ID number which the company has assigned to each stack. This number shall be prefixed with the capital letter "S" followed by a number. Number the stacks consecutively, starting with the number "1", using steps of 1.
Example - S1, S2, ... S23.

If this emissions unit vents to a stack, whether or not there is an associated control device, then enter the stack ID number. **If there is no stack, enter "F" for fugitive emissions and complete Form 9420-C9.**

EMISSION UNIT

EIS # _____

Emission Unit ID # _____

Emission Unit Name _____

EMISSION PT #	EMISSION POINT DESCRIPTION	MAKE	MODEL	MAX. RATED CAPACITY	INSTALL DATE	CONTROL ID	STACK ID

INSTRUCTIONS FOR FORM 9420-B3 EMISSION UNIT/RAW MATERIAL USAGE

EMISSION UNIT NAME, EMISSION UNIT ID #, EIS

Enter these exactly as they are assigned in Form 9420-B1.

RAW MATERIAL NAME

Enter the name of the raw material.

Example - Red enamel paint, Xylene, 3/8 Crushed stone.

PRODUCT NUMBER

The product number is the number to the left of the product name on Form 9420-B4. Enter all product numbers which are associated with each raw material.

Example - Raw Material Product No.
Red Paint -----1/2/5
Xylene -----1/2/3/4/5
Green Paint -----2

Example - Raw Material Product No.
Crushed Rock -----1
Cement -----1
Sand -----1

CONTINUOUS

Actual, Units/Hour: Enter the actual amount of each material going into the process, per hour, during normal operation.

Maximum, Units/Hour: Enter the maximum amount of each material that you propose to introduce into the process, per hour, keeping in mind that the operation will be limited to these amounts and all potential emissions will be based on these amounts.

Actual, Units/Year: Enter the actual amount of this material used in a year.

Maximum, Units/Year: Use the following formula - Maximum Units/Hour x Maximum Hours/Day x Maximum Days/Year. Keep in mind that the operation will be limited by permit condition to these amounts and recordkeeping and reporting requirements may be required.

BATCH

Actual, Units/Batch: Enter the actual amount of each material introduced to the process for each batch during normal operation.

Actual, Hours/Batch: Enter the actual number of hours (one half hour would be entered as 0.5 hr) to process one batch under normal operating conditions.

Actual, Batches/Year: Enter the actual number of batches processed in a year.

Actual, Units/Year: Enter the actual amount of this material used in a year.

Maximum, Units/Batch: Enter the maximum amount of material that you propose to introduce to the process, per batch.

Maximum, Hours/Batch: Enter the maximum number of hours to process one batch.

Maximum, Batches/Year: Enter the maximum number of batches that would be expected to be processed in a year.

Maximum, Units/Year: Enter the maximum amount of material which may be introduced to this process in a year, using the maximum Units/Batch and the maximum number of Batches/Year. Keep in mind that the operation will be limited by permit condition to these amounts and recordkeeping and reporting may be required.

EMISSION UNIT / RAW MATERIAL USAGE

Emission Unit Name _____ Emission Unit ID _____ EIS # _____

		CONTINUOUS		BATCH			PRODUCT NUMBER(S)
		UNITS/HR	UNITS/HR	UNITS/BATCH	HR/BATCH	BATCHES/YR	
(1)	RAW MATERIAL NAME						
	Actual						
	Maximum						
(2)	RAW MATERIAL NAME						
	Actual						
	Maximum						
(3)	RAW MATERIAL NAME						
	Actual						
	Maximum						
(4)	RAW MATERIAL NAME						
	Actual						
	Maximum						
(5)	RAW MATERIAL NAME						
	Actual						
	Maximum						
(6)	RAW MATERIAL NAME						
	Actual						
	Maximum						
(7)	RAW MATERIAL NAME						
	Actual						
	Maximum						
(8)	RAW MATERIAL NAME						
	Actual						
	Maximum						
(9)	RAW MATERIAL NAME						
	Actual						
	Maximum						
(10)	RAW MATERIAL NAME						
	Actual						
	Maximum						

INSTRUCTIONS FOR FORM 9420-B4 EMISSION UNIT/PRODUCTION RATE

EMISSION UNIT NAME, EMISSION UNIT ID #, EIS

Enter these exactly as they are assigned in Form 9420-B1.

PRODUCT NAME

Enter the name of the product. For example - Painted wooden doorchimes, painted wooden wall sconces, phenolic resin.

MATERIAL NUMBER

The material number is the number to the left of the raw material name on Form 9420 - B3. Enter all material numbers which are associated with each product in the Emissions Unit.

Example - Product Name Material No.
Wooden chimes 1/2/3

CONTINUOUS

Actual, Units/Hour: Enter the actual number of units for each product per hour produced by this process per hour during normal operation.

Maximum, Units/Hour: Enter the number of product-units which may be produced by the process per hour under maximum operating conditions.

Actual, Units/Year: Enter the actual number of product-units which are produced by this process in a year.

Maximum, Units/Year: Enter the maximum number of product-units which may be produced by this process under maximum operating conditions, using the maximum amount of raw materials for the maximum number of days/year.

BATCH

Actual, Units/Batch: Enter the actual number of product-units per product which are produced by this process per batch during normal operation.

Actual, Hours/Batch: Enter the number of hours to process one batch under normal operating conditions. This should be the same number as Hours/Batch under Raw Material Usage.

Actual, Batches/Year: Enter the actual number of batches processed in a year. This should be the same number as Batches/Year under Raw Material Usage.

Actual, Units/Year: Enter the actual number of product-units per product which are produced by this process in a year under normal operating conditions.

Maximum, Units/Batch: Enter the maximum number of product-units which are produced by this process per batch under maximum operating conditions.

Maximum, Hours/Batch: Enter the maximum number of hours to process one batch. This should be the same number as Maximum Hours/Batch under Raw Material Usage.

Maximum, Batches/Year: Enter the maximum number of batches that would be expected to be processed in a year. This should be the same number as Maximum Batches/Year under Raw Material Usage.

Maximum, Units/Year: Enter the maximum number of product-units which may be produced by this process under maximum operating conditions, using the maximum amount of raw materials for the maximum number of days/year.

EMISSION UNIT / PRODUCTION RATE

Emission Unit Name _____ Emission Unit ID # _____ EIS # _____

		CONTINUOUS		BATCH			UNITS/YR	RAW MATERIAL NUMBER
		UNITS/HR	UNITS/HR	UNITS/BATCH	HR/BATCH	BATCHES/YR		
(1)	PRODUCT NAME							
	Actual							
	Maximum							
(2)	PRODUCT NAME							
	Actual							
	Maximum							
(3)	PRODUCT NAME							
	Actual							
	Maximum							
(4)	PRODUCT NAME							
	Actual							
	Maximum							
(5)	PRODUCT NAME							
	Actual							
	Maximum							
(6)	PRODUCT NAME							
	Actual							
	Maximum							
(7)	PRODUCT NAME							
	Actual							
	Maximum							
(8)	PRODUCT NAME							
	Actual							
	Maximum							
(9)	PRODUCT NAME							
	Actual							
	Maximum							
(10)	PRODUCT NAME							
	Actual							
	Maximum							

INSTRUCTIONS FOR FORM 9420-C1 FABRIC FILTER

A fabric filter removes dust from a gas stream by passing the stream through a porous fabric. Dust particles form a porous cake on the surface of the fabric. It is normally this cake that actually does the filtration.

STACK ID(S) – Enter the unique Stack ID for each stack associated with this control device. All stack IDs must begin with the letter S followed by a number. If the stack serves several units, the same stack ID should be used to reference this stack. *Example – S31*

POSITION IN SERIES – If there are several devices operating in a series indicate in what position this device is located. If the exhaust air stream goes through this unit and then second unit then this would be the # 1 of 2 units.

CONTROL ID – Assign a unique control device ID # for this control device. All control device IDs begin with a C followed by a number. This ID must correspond to all other references in the application. *Example – C1, C135.*

EMISSION UNIT ID(S) – List all emission unit IDs whose emissions are controlled by this device. The ID(s) must correspond to the ID(s) indicated in Form 9420-B1.

MANUFACTURER – Enter the manufacturer of the device. *Example – Dusty Dustex.*

MODEL – Enter the model number of the device.

DESCRIBE CONTROL SYSTEM – Give a brief description of the control device. Include such information as other devices used in conjunction with this device; number of compartments, etc. *Example – This fabric filter is the second of two control devices with the first unit being a cyclone (C-1). This control system collects sanding dust from the #3 sanding room. It has 2 separate compartments each of which can be operated while the other is shut down for maintenance.*

POLLUTANT(S) COLLECTED – Enter the pollutant(s) collected.
Example – Particulate matter (including lead)

EFFICIENCY (%) – Enter the % of material collected of the total amount entering the device.

DETERMINATION CODE – Enter the code to represent how the efficiency was determined.

- 1 = Calculated. (Attach all calculations)
- 2 = Manufacturers specifications. (Enclose documentation)
- 3 = Source test. (Attach documentation or reference test reports already submitted to the District.

PRESSURE DROP (IN H₂O) – Enter the design pressure drop range across the device in inches H₂O during normal operation.

AFR (ACFM) – Enter the actual air flow rate in actual cubic feet per minute during normal operation.

INLET TEMP (°F) – Enter the inlet temperature during normal operation.

OUTLET TEMP (°F) – Enter the outlet temperature during normal operation.

FILTER MATERIAL – Enter the filter material type. This can be obtained by contacting the supplier of the filter. Examples – fiberglass, nomex, wool, cotton, nylon, etc.

FABRIC FILTER (cont)

DISPOSITION OF COLLECTED MATERIAL – What happens to the material collected. *Example – recycled and used in the process. Disposed of in a landfill.*

AIR TO CLOTH RATIO – This is the ratio between the actual air flow rate (ACFM) listed above and the filter surface area listed in the next block.

Example – 10,000 ACFM divided by 1000 square feet of filter area would give an air to cloth ratio of 10:1.

FILTER SURFACE AREA (ft²) – The total square feet of filter surface area. Round off to the nearest whole number.

DESCRIBE CLEANING PROCEDURES – Most fabric filters have a mechanism to clean the filter media on a regular basis. The most common techniques are shaker, reverse air, pulse jet, and sonic cleaning. There are some types that require the replacement of the filter media rather than cleaning. Other parameters to include would be the frequency of cleaning, on-stream or off-stream cleaning, duration of cleaning, PSI, etc. Describe the cleaning procedures.

DESCRIBE MAINTENANCE PROCEDURES – Routine maintenance is one of the most important factors in maintaining continual compliance using a fabric filter. This is especially true when abrasive particulates are being collected. Describe all maintenance procedures including the monitoring of pressure drops, temperature, dust removal, opacity, etc. Describe methods used and frequency to detect leaks and holes in filter media. List spare parts/filters maintained on site.

DESCRIBE ANY MONITORING DEVICES, GAUGES, TEST PORTS, ETC. – List any devices and/or gauges installed on the system. *Example – magnahelics, temperature gauges, opacity monitors, etc.* Describe any test ports available for inspectors to conduct measurements of temperature and pressure drop. Describe quality assurance procedures to assure all gauges are operating properly.

SCHEMATIC OF CONTROL DEVICE – Provide a schematic of the control device unless it is included in the manufacturer's literature enclosed.

FORM 9420-C1

[illegible]

INSTRUCTIONS FOR FORM 9420-C2 ELECTROSTATIC PRECIPITATOR (ESP)

An electrostatic precipitator removes particulate matter from a gas stream by passing the gas stream through discharge electrodes and collection plates. Most particulates become charged and are collected on the plates.

STACK ID(S) – Enter the unique stack ID for each stack associated with this control device. If the stack serves several units, the same stack ID should be used to reference this stack. All stack IDs must begin with the letter S followed by a number. *Example – S21*

POSITION IN SERIES – If there are several devices operating in a series indicate in what position this device is located. If the exhaust air stream goes through this unit and then a second unit then this would be the # 1 of 2 units.

CONTROL ID – Assign a unique control device ID for this control device. All control device IDs must begin with a C followed by a number. This ID must correspond to the ID used for this control device on all other references. *Example – C1, C135.*

CONTROL DEVICE IS ASSOCIATED WITH EMISSION UNIT ID(S) – List all emission unit IDs whose emissions are controlled by this device. The ID(s) must correspond to the ID(s) indicated in Form 9420-B.

MANUFACTURER – Enter the manufacturer of the device. *Example – Buell.*

MODEL – Enter the model number of the device.

DESCRIBE CONTROL SYSTEM – Describe the type of ESP: single stage, two stage, low voltage, high voltage, hot side, cold side, other (describe), negative or positive corona. Also, list any ancillary equipment: level detectors, hopper insulation, hopper heaters, and weather enclosures.

POLLUTANT COLLECTED – Enter the pollutant collected.
Example – Particulate matter.

EFFICIENCY (%) – Enter the % of material collected of the total amount entering the device.

DETERMINATION CODE – Enter the code to represent how the efficiency was determined.

- 1 = Calculated. (Attach all calculations)
- 2 = Manufacturers specifications. (Enclose documentation)
- 3 = Source test. (Attach documentation or reference test reports already submitted to the District.

PRESSURE DROP (IN H₂O) – Enter the design pressure drop range across the device in inches H₂O during normal operation.

AFR (ACFM) – Enter the actual air flow rate in actual cubic feet per minute during normal operation.

INLET TEMP (°F) – Enter the inlet temperature during normal operation.

OUTLET TEMP (°F) – Enter the outlet temperature during normal operation.

DISPOSITION OF COLLECTED MATERIAL – What happens to the material collected.
Example – recycled and used in the process. Material was disposed of in a landfill.

ESP (cont)

COLLECTION PLATE AREA (ft²) – Enter the total ESP collection plate surface area expressed in square feet. See manufacturers specifications.

NO. OF COMPARTMENTS – List the number of compartments and their arrangement (series or in parallel sections).

NO. OF CELLS PER COMPARTMENT – List the number of cells per compartment.

FIELD STRENGTH (VOLTS)

CHARGING – Enter the volts of field strength imparting the charge to the particles to be collected.

COLLECTING – Enter the volts of field strength where particles are to be collected.

CORONA POWER (WATTS/1000 CFM) – List the corona power (power input) in watts per 1000 CFM. See manufacturer specifications.

ELECTRICAL USAGE (KW/HR) – List electrical usage in kilowatts per hour.

RESISTIVITY OF POLLUTANT (OHM-CM) – List the resistivity of pollutant to be collected by the unit. Resistivity is the overall resistance to charge dissipation to the ESP collection plate.

GAS VISCOSITY (POISE) – If the gas stream is other than predominantly air, list the viscosity of the gas stream in poise.

DESCRIBE CLEANING METHOD – List the cleaning method(s) used. *Example – plate rapping, plate vibrating, washing.*

DESCRIBE ANY MAINTENANCE PROCEDURES – Describe maintenance procedures performed on ESP.

DESCRIBE ANY MONITORING DEVICES, GAUGES, TEST PORTS, ETC. – Describe any stack monitoring devices, gauges, or test port locations. Provide any calibration or maintenance activities and frequency. Also describe the quality assurance procedures to prove the gauges are calibrated and operating correctly. *Examples – Primary voltage, secondary current, spark rate meter gauges, stack temperature, opacity monitor, etc.*

SCHEMATIC OF CONTROL DEVICE – Provide a schematic of the control device unless it is included in the manufacturer's literature enclosed.

[illegible]

INSTRUCTIONS FOR FORM 9420-C3 THERMAL

A control device which operates by thermal (non-catalytic) and catalytic incineration can oxidize any hydrocarbons and/or toxic pollutants into carbon dioxide and water. High temperature and residence time must be sufficient to obtain the desired oxidation results.

STACK ID(S) – Enter the unique stack ID for each stack associated with this control device. If the stack serves several units, the same stack ID should be used to reference this stack. All stack IDs must begin with S followed by a number. *Example – S10*

POSITION IN SERIES – If there are several devices operating in a series indicate in what position this device is located. If the exhaust air stream goes through this unit and then a second unit then this would be the # 1 of 2 units.

CONTROL ID – Assign a unique control device ID for this control device. All control device IDs begin with a C followed by a number. This ID must correspond to the ID used for this control device on all other references. *Example – C1, C135.*

EMISSION UNIT ID(S) – List all emission unit IDs whose emissions are controlled by this device. The ID(s) must correspond to the ID(s) indicated in Form 9420-B1.

MANUFACTURER – Enter the manufacturer of the device. *Example – Buell.*

MODEL – Enter the model number of the device.

DESCRIBE CONTROL SYSTEM – Provide a brief description of control system.
Example – Thermal incinerator which controls VOC emissions from can painting line.

Specify whether incinerator is direct-flame (thermal) or catalytic.

IF CATALYST USED

TYPE – Enter the type of catalyst material. *Example – Palladium on ceramic honeycomb design.*

SQUARE FEET OF CATALYST – Enter the square feet of catalyst surface area.

POLLUTANT(S) REMOVED – Enter the pollutant(s) destroyed by the control device. *Example – Toluene, MEK, Xylene.*

EFFICIENCY (%) – Enter the overall destruction efficiency of the device.

DETERMINATION CODE – Enter the code to represent how the efficiency was determined.

- 1 = Calculated. (Attach all calculations)
- 2 = Manufacturers specifications. (Enclose documentation)
- 3 = Source test. (Attach documentation or reference test reports already submitted to the District.

INLET TEMP (°F) – Enter the inlet temperature during normal operation.

OUTLET TEMP (°F) – Enter the outlet temperature during normal operation.

AIR FLOW RATE (ACFM) – Enter the actual air flow rate in actual cubic feet per minute during normal operation.

THERMAL (cont.)

COMBUSTION CHAMBER VOLUME (ft³) - Enter the volume of the combustion chamber.

COMBUSTION TEMP (°F) - Enter the minimum temperature in the combustion chamber during normal operation.

EXCESS AIR - Enter the amount of air provided in excess of that ideally required for complete combustion.

MOISTURE CONTENT OF THE EMISSIONS STREAM (%) - Give the maximum % of moisture in the emission stream.

METHOD USED TO INCREASE MIXING - Higher destruction efficiencies are achieved by thoroughly mixing the gas stream in the combustion chamber. Describe the methods used to enhance mixing. *Example - Refractory baffles, baffle plates, swirl-fired burner.*

DESCRIBE STARTUP/SHUTDOWN PROCEDURES - Describe in detail the steps taken to bring the incinerator from a cold state to maximum operation and then through shutdown.

DESCRIBE MAINTENANCE PROCEDURES - Describe maintenance procedures performed on the control device.

DESCRIBE ANY MONITORING DEVICES, GAUGES, TEST PORTS, ETC. - Describe any stack monitoring devices, gauges, or test port locations. Provide any calibration or maintenance activities and frequency. Also describe the quality assurance procedures to assure the gauges are calibrated and operating correctly. *Example - Temperature, CO Monitor, opacity monitor.*

TYPE FUEL - Enter the type(s) of fuel(s) used in the device.

TOTAL MAX FIRING RATE (MILLION BTU/HR) - Enter the total maximum firing rate for all burners based on input.

MAX ANNUAL FUEL USE - Indicate the maximum of fuel you propose to burn in one year. If this is less than the maximum capacity of the fuel burners then the unit will be restricted to this amount.

MAX HOURLY FUEL USE - Indicate the maximum amount of fuel you propose to burn in one hour. If this is less than the maximum capacity of the fuel burners then the unit will be restricted to this amount.

ACTUAL ANNUAL FUEL USE - Indicate the actual amount of fuel consumed in one year during normal operation.

ACTUAL HOURLY FUEL USE - Indicate the actual amount of fuel consumed in one hour during normal operation.

UNITS - Indicate the unit for the fuel use data entered in this section.

FORM 9420-C3

CONTROL DEVICE (THERMAL)

Stack (IDs):		Position in Series of Controls: # of units		Control ID:
Control device is associated with Emission Unit ID(s):				
Manufacturer:			Model:	
Describe Control System:				
If Catalyst Used:		Type:	Sq. Feet of Catalyst:	
Pollutant(s) Removed:		Efficiency (%):	Deter Code:	
Inlet Temp (°F):		Outlet Temp (°F):		
Air Flow Rate (ACFM):				
Combustion Chamber Volume (ft³):			Combustion Temp	
% Excess Air:		Moisture content of the emissions stream (%):		
Method used to increase mixing:				
Describe Startup Procedures:				
Describe Maintenance Procedures:				
Describe Any Monitoring Devices, Gauges, Test Ports, etc:				
Type Fuel:		Total Max Firing Rate (MMBtu/HR):		
Max Annual Fuel Use:		Max Hourly Fuel Use:		Units:
Actual Annual Fuel Use:		Actual Hourly Fuel Use:		
Include Schematic of Control Device on Separate Page				

INSTRUCTIONS FOR FORM 9420-C4 ADSORBER

Adsorption is a control where gaseous pollutants are extracted from gas phase and concentrated at the surface of a solid or liquid. Carbon is commonly used to adsorb volatile organic compounds from an airstream.

STACK ID(S) – Enter the unique stack ID for each stack associated with this control device. Each stack ID must correspond to all other references to each stack. If the stack serves several units, the same stack ID should be used to reference this stack. All stack IDs must begin with S followed by a number. *Example - S5*

POSITION IN SERIES – If there are several devices operating in a series indicate in what position this device is located. If the exhaust air stream goes through this unit and then a second unit then this would be the # 1 of 2 units.

CONTROL ID – Assign a unique control device ID for this control device. All control device IDs begin with a C followed by a number. This ID must correspond to the ID used for this control device on all other references. *Example - C1, C135.*

EMISSION UNIT ID(S) – List all emission unit IDs whose emissions are controlled by this device. The ID(s) must correspond to the ID(s) indicated in Form 9420-B.

MANUFACTURER – Enter the manufacturer of the device. *Example - Buell.*

MODEL – Enter the model number of the device.

DESCRIBE CONTROL SYSTEM – Give a detailed description of the adsorber system used. Indicate whether the system is a recirculating system, a nonregenerative system, or a regenerative system; whether the system has a fixed, moving, or fluidized bed, whether it involves multiple beds, and any other relevant information. Include the gas pretreatment methods such as particulate removal, heat exchange, dehumidification, etc. List the methods for bed regeneration such as thermal, chemical, pressure swing, displacement cycle, etc. Attach a blueprint or diagram of the system along with the manufacturer's literature.

POLLUTANT(S) COLLECTED – Enter the pollutant(s) collected. *Example - VOC.*

AFR (ACFM) – Enter the actual air flow rate in actual cubic feet per minute during normal operation.

INLET TEMP (°F) – Enter the inlet temperature during normal operation.

PRESSURE DROP (IN. H₂O) – Enter the design pressure drop range across the device in inches H₂O during normal operation. *Example - 4-6 inches.*

OUTLET TEMP (°F) – Enter the outlet temperature during normal operation.

SIZE OF COMPARTMENTS (FT) – Specify the dimensions of the adsorber bed, either length, width, and height, or bed depth and radius in feet. The bed depth is the dimension parallel to the gas flow.

TYPE OF ADSORPTION MATERIAL – Provide the chemical composition of the bed material. *Example - powdered coal base activated carbon, granular wood base activated carbon, modified zeolite, clays, oxides, nutshell base activated carbon.* Include manufacturer's literature if available.

ADSORBER (cont)

NUMBER OF COMPARTMENTS – This is the number of compartments or beds into which the adsorber unit is divided. The gas flow can be cut off individually from these beds. Include all the beds that are in use.

VOLATILE CONCENTRATIONS (PPM-V)

ENTERING UNIT – Specify the total VOC concentration of the gas stream entering the adsorber unit in the volume of VOC per million volumes of gas stream.

LEAVING UNIT – Specify the total VOC concentration of the gas stream leaving the adsorber unit.

RELATIVE HUMIDITY OF AIR STREAM ENTERING UNIT – Specify the relative humidity of the gas stream that enters the adsorber unit.

EFFICIENCY – Give the overall efficiency in weight percentage for the adsorber used. This is the design efficiency of the adsorber for the design pollutant. Include documentation to support the efficiency.

ORIENTATION OF BEDS – Specify whether the adsorption beds are vertical or horizontal.

DETERMINATION METHOD – Enter the code to represent how the efficiency was determined.

- 1 = Calculated. (Attach all calculations)
- 2 = Manufacturers specifications. (Enclose documentation)
- 3 = Source test. (Attach documentation or reference test reports already submitted to the District.

BREAKTHROUGH CAPACITY – Provide the breakthrough capacity in pounds of vapor per pound of adsorbent. This is the capacity of the bed at which unreacted vapors begin to be exhausted.

CYCLE TIME – Specify the service time of the adsorber before breakthrough including units.

DISPOSITION OF COLLECTED MATERIAL – Describe final disposition of adsorbed material.
Example – reused, disposed of as hazardous waste.

DESCRIBE MAINTENANCE PROCEDURES – Provide a detailed explanation of the maintenance procedures used to assure unit is operating at maximum efficiency.

DESCRIBE ANY MONITORING DEVICES, GAUGES, TEST PORTS, ETC. – Describe any stack monitoring devices, gauges, or test port locations. Provide any calibration or maintenance activities and frequency. Also describe the quality assurance procedures to assure the gauges are calibrated and operating correctly. *Example - inlet/outlet vapor concentrations, temperature, etc.*

SCHEMATIC OF CONTROL DEVICE – Provide a schematic of the control system unless included with manufacturers literature. Indicate all equipment, mass flow, exhaust, air flow, fuel pipes, water pipes, collection areas, removal of collected material, etc.

FORM 9420-C4

CONTROL DEVICE (ADSORBER)

[illegible]

INSTRUCTIONS FOR FORM 9420-C5 MECHANICAL

Mechanical collectors, such as settling chambers, cyclones, and multicyclones, utilize gravity and inertia to separate particulates from a gas stream.

STACK ID(S) – Enter the unique Stack ID for each stack associated with this control device. Each ID must correspond to the Stack ID used in all other references to each stack. If the stack serves several units, the same Stack ID should be used to reference this stack. All stack IDs must begin with the letter S followed by a number. *Example – S22*

POSITION IN SERIES – If there are several devices operating in a series indicate in what position this device is located. If the exhaust air stream goes through this unit and then a second unit then this would be the # 1 of 2 units.

CONTROL ID – Assign a unique control device ID for this control device. All control device IDs must begin with C followed by a number. This ID must correspond to the ID used on all other references. *Example – C1, C135.*

EMISSION UNIT ID(S) – List all emission unit IDs whose emissions are controlled by this device. The ID(s) must correspond to the ID(s) listed in Form 9420-B1.

MANUFACTURER – Enter the manufacturer of the device.

MODEL – Enter the model number of the device.

DESCRIBE CONTROL SYSTEM – Provide a detailed description of the control device. Include all information needed to evaluate the system that is not already included.

POLLUTANT(S) COLLECTED – Enter the pollutant(s) collected.
Example – Particulate (cement).

EFFICIENCY (%) – Enter the % of material collected of the total amount entering the device.

INLET TEMP (°F) – Enter the inlet temperature during normal operation.

PRESSURE DROP (IN. H₂O) – Enter the design pressure drop range across the device in inches H₂O during normal operation. *Example – 4-6 inches.*

DETERMINATION CODE – Enter the code to represent how the efficiency was determined.

- 1 = Calculated. (Attach all calculations)
- 2 = Manufacturers specifications. (Enclose documentation)
- 3 = Source test. (Attach documentation or reference test reports already submitted to the District.

OUTLET TEMP (°F) – Enter the outlet temperature during normal operation.

AIR FLOW RATE (ACFM) – Enter the actual air flow rate in actual cubic feet per minute during normal operation.

DISPOSITION OF REGENERATED MATERIAL – Describe the final disposition of collected material. *Example – reused, disposed of as hazardous waste.*

MECHANICAL (cont.)

SETTLING CHAMBER – There are two types of gravity settling chambers: the **SIMPLE EXPANSION CHAMBER** and **THE MULTIPLE TRAY SETTLING CHAMBER**. The **SIMPLE EXPANSION CHAMBER** is basically a long, horizontal box with inlet, outlet and collection hoppers. The gas stream enters the expansion section of the device and its velocity is reduced, thereby allowing particulate matter in the gas stream to be collected by gravity. The **MULTIPLE TRAY SETTLING CHAMBER** (Howard settling chamber) operates on the same principle as the simple expansion chamber, but there are several horizontal collection plates in order to shorten the settling path of the particle, thus enhancing collection efficiency. The **BAFFLE CHAMBER** is a variation of the settling chamber. These units have baffles within the chamber in order to impart a downward motion to the particles in the gas stream, thus collection is accomplished by inertia as well as gravity.

DIMENSIONS (TO NEAREST INCH) –

LENGTH – Length of the chamber in feet and inches.

WIDTH – Width of the chamber in feet and inches.

HEIGHT – Greatest distance a particle must fall to be collected. In multiple tray devices this is the distance between trays.

VELOCITY (FT/SEC) – Specify the velocity at which the particulate laden gas travels through the chamber.

TRAYS – If device is of multiple tray design, specify number of horizontal trays.

BAFFLES – If the device is a baffle chamber, specify the number of baffles.

CYCLONE – An inertial separator in which the particulate laden gas stream is forced to spin in a vortex. As the gas changes direction, the inertia of the particles causes them to be separated from the gas stream and collected.

INLET VELOCITY (FT/SEC) – The velocity of the air stream entering the cyclone.

DIMENSIONS – Provide the dimensions of the cyclone. Refer to the diagram below for a description of variables for a typical top inlet cyclone. For other types of cyclones (such as bottom inlet, axial inlet or straight-through designs) provide a diagram labeling the dimensions of the analogous parts.

IF WET SPRAY UTILIZED – If wet spray is used inside the cyclone to enhance collection efficiency complete this section.

LIQUID USED – Specify liquid that is sprayed.

FLOW RATE – Rate of liquid application in gallons per minute.

MAKE UP RATE – Rate of replacement for liquid lost to evaporation, absorption and disposal, in gallons per minute.

MULTICYCLONE – When high efficiency and large throughput are necessary, multiple cyclones may be operated in parallel. In a multiple cyclone separator, the housing typically contains a large number of axial inlet cyclone tubes.

NO. TUBES – Number of tubes in the multicyclone.

DIAMETER OF TUBES – Diameter of tubes in inches.

IS A HOPPER ASPIRATION SYSTEM UTILIZED? – Yes or No. Hopper aspiration is when a small portion of the total gas flow is drawn off through the collection hopper, which can increase collection efficiency by reducing particulate reentrainment into cyclone tubes.

DESCRIBE MAINTENANCE PROCEDURES – Provide a detailed explanation of the maintenance procedures used to assure unit is operating at maximum efficiency.

DESCRIBE ANY MONITORING DEVICES, GAUGES, TEST PORTS, ETC. – Describe any stack monitoring devices, gauges, or test port locations. Provide any calibration or maintenance activities and frequency. Also describe the quality assurance procedures to assure the gauges are calibrated and operating correctly.

SCHEMATIC OF CONTROL DEVICE – Provide a schematic of the control system unless included with manufacturers literature.

FORM 9420-C5

[illegible]

INSTRUCTIONS FOR FORM 9420-C6 ABSORBER

A gas absorber is a control device where one or more selected gaseous pollutants are removed by treatment with a liquid through thorough contact.

STACK ID(S) – Enter the unique stack ID for each stack associated with this control device. Each ID must correspond to all other references to each stack. If the stack serves several units, the same stack ID should be used to reference this stack. All stack IDs must begin with S followed by a number. *Example – S34*

POSITION IN SERIES – If there are several devices operating in a series indicate in what position this device is located. If the exhaust air stream goes through this unit and then a second unit then this would be the # 1 of 2 units.

CONTROL ID – Assign a unique control device ID for this control device. All control device IDs must begin with a C followed by a number. This ID must correspond to all other references. *Example – C1, C135.*

CONTROL DEVICE IS ASSOCIATED WITH EMISSION UNIT ID(S) – List all emission unit IDs whose emissions are controlled by this device.

MANUFACTURER – Enter the manufacturer of the device.

MODEL – Enter the model number of the device.

DESCRIBE CONTROL SYSTEM – Give a detailed description of the gas absorber system. Include information on specific nozzle type for spray towers, throat type and throat velocity for venturi scrubbers, or packing materials and packing length for packed-bed type absorbers. Also include the liquid distribution system, the mist elimination system, and any other relevant information. Attach a blueprint or diagram of the system or the manufacturer's literature.

POLLUTANT(S) COLLECTED – Enter the pollutant collected. *Example – Ammonia.*

PRESSURE DROP (IN. H₂O) – Enter the design pressure drop range across the device in inches of water during normal operation. *Example – 4–6 inches.*

INLET TEMP. (°F) – Enter the inlet temperature during normal operation.

EFFICIENCY (%) – Enter the % of material collected of the total amount entering the device.

DETERMINATION CODE – Enter the code to represent how the efficiency was determined.

- 1 = Calculated. (Attach all calculations)
- 2 = Manufacturers specifications. (Enclose documentation)
- 3 = Source test. (Attach documentation or reference test reports already submitted to the District.

AFR (ACFM) – Enter the actual air flow rate in actual cubic feet per minute during normal operation.

OUTLET TEMP. (°F) – Enter the outlet temperature during normal operation.

GAS VELOCITY (FT/SEC) – Enter the gas velocity through the net column.

TOTAL GAS PRESSURE – Specify the total inlet gas pressure in atm.

ABSORBER (cont.)

GAS DEW POINT (°F) – Enter the temperature at which the gas stream first changes into liquid phase.

TYPE OF SYSTEM – Specify types of gas absorbing system used. *Example – spray tower, cyclone spray chamber, packed columns, plate columns, venturi scrubber, sparging tank.*

PACKED COLUMNS – Complete this only if the absorbing system is classified as a packed column system. This absorbing process is a continuous operation where the gas and liquid phases flow through the system in a continuous manner with intimate contact throughout.

TYPE OF PACKING USED – Specify packing used in your packed tower.

Example – partition tricklers, pall rings, berl saddles, tellerettes.

COLUMN LENGTH (FT) – Enter the length of the packed column.

COLUMN DIAMETER (FT) – Enter the column diameter.

PLATE COLUMNS – Complete this only if the absorbing system is classified as a plate column system. This absorbing process is a staged operation on plates or trays where the liquid and gas are contacted in stepwise fashion in the vertical cylinders.

PLATE SPACING – Enter the distance between the plates in the absorbing tower.

COLUMN LENGTH (FT) – Enter the length of the packed column.

COLUMN DIAMETER (FT) – Enter the column diameter.

pH OF LIQUID – Enter design pH of liquid.

LIQUID USED – Specify what kind of liquid is used. Include the name of the additives. *Example – propanol, detergents, etc.*

PERCENT RECIRCULATED – If the absorber is operated with recirculating slurries or solutions, specify the percentage of the liquid returned to the system.

TOTAL LIQUID INJECTION RATE (GAL/MIN) – Enter the total volumetric flow rate of the liquid.

MAKE UP RATE (GAL/MIN) – Specify the amount of new liquid that must be added to the system due to evaporation or discharge to a disposal system.

DISPOSITION OF LIQUID WASTE – What happens to liquid waste after it is discharged from absorber.

DESCRIBE MAINTENANCE PROCEDURES – Provide a detailed explanation of the maintenance procedures employed to minimize emissions from the unit.

DESCRIBE ANY MONITORING DEVICES, GAUGES, TEST PORTS, ETC. – Describe any stack monitoring devices, gauges, or test port locations. Provide any calibration or maintenance activities and frequency. Also describe the quality assurance procedures to assure the gauges are calibrated and operating correctly.

SCHEMATIC OF CONTROL DEVICE – Provide a schematic of the control system. Indicate all equipment, mass flow, exhaust, air flow, fuel pipes, water pipes, collection areas, removal of collected material, etc.

[illegible]

INSTRUCTIONS FOR FORM 9420-C7 WET SCRUBBER

Wet scrubbers are commonly used to separate particulates (sometimes gases) from an airstream. Scrubber liquids are introduced for particle collection. The system performance depends on the particle size of the pollutant being collected.

STACK ID(S) – Enter the unique Stack ID for each stack associated with this control device. Each ID must correspond to all other references to each stack. If the stack serves several units, the same Stack ID should be used to reference this stack. All Stack IDs must begin with S followed by a number. *Example S6.*

POSITION IN SERIES – If there are several devices operating in a series indicate in what position this device is located. If the exhaust air stream goes through this unit and then a second unit then this would be the # 1 of 2 units.

CONTROL ID – Assign a unique control device ID for this control device. All control device IDs begin with a C followed by a number. This ID must correspond to all other references. *Example - C1, C135.*

EMISSION UNIT ID(S) – List all emission unit IDs whose emissions are controlled by this device. The ID(s) must correspond to the ID(s) indicated in Form 9420-B1.

MANUFACTURER – Enter the manufacturer of the device.

MODEL – Enter the model number of the device.

DESCRIBE CONTROL SYSTEM – Give a detailed description of the wet scrubber system used. Include information on specific nozzle type for spray towers, throat type and throat velocity for venturi scrubbers, or packing materials and packing length for packed-bed type scrubbers. Also include the liquid distribution system, the mist elimination system, and any other relevant information. Include manufacturer's literature.

POLLUTANT COLLECTED – Enter the pollutant collected.
Example - Particulates (lime dust).

PRESSURE DROP (IN. H₂O) – Enter the design pressure drop range across the device in inches H₂O during normal operation. *Example - 4-6 inches.*

INLET TEMP. (°F) – Enter the inlet temperature during normal operation.

EFFICIENCY (%) – Enter the % of material collected of the total amount entering the device.

DETERMINATION CODE – Enter the code to represent how the efficiency was determined.

- 1 = Calculated. (Attach all calculations)
- 2 = Manufacturer's specifications. (Enclose documentation)
- 3 = Source test. (Attach documentation or reference test reports already submitted to the District.)

AFR (ACFM) – Enter the actual air flow rate in actual cubic feet per minute during normal operation.

OUTLET TEMP. (°F) – Enter the outlet temperature during normal operation.

WET SCRUBBER (cont.)

TYPE OF SYSTEM – Specify type of particulate scrubber system used.

Example - spray tower, cyclone spray tower, packed bed scrubber, tray-type scrubber, mechanically aided scrubber, venturi scrubber, orifice scrubber.

TYPE OF PACKING USED IF ANY – Specify packing used in your packed tower.

Example - partition tricklers, pall rings, berl saddles, tellerettes.

LIQUID USED – Specify what kind of liquid is used. Include the name of the additives.

Example - propanol, detergents, etc.

pH - pH of liquid used - design.

PERCENT RECIRCULATED – If the scrubber is operated with recirculating slurries or solutions, specify the percentage of the liquid returned to the system.

TOTAL LIQUID INJECTION RATE (GAL/MIN) – Specify the total volumetric flow rate of the liquid.

MAKE UP RATE (GAL/MIN) – Specify the amount of new liquid that must be added to the system due to evaporation or discharge to a disposal system.

DISPOSITION OF LIQUID WASTE - What happens to liquid waste after it is discharged from scrubber.

DESCRIBE MAINTENANCE PROCEDURES – Provide a detailed explanation of the maintenance procedure used to minimize emissions from the unit.

DESCRIBE ANY MONITORING DEVICES, GAUGES, TEST PORTS, ETC. – Describe any stack monitoring devices, gauges, or test port locations. Provide any calibration or maintenance activities and frequency. Also describe the quality assurance procedures to assure the gauges are calibrated and operating correctly.

SCHEMATIC OF CONTROL DEVICE – Provide a schematic of the control system. Indicate all equipment, mass flow, exhaust, air flow, fuel pipes, water pipes, collection areas, removal of collected material. Disregard if manufacturer's literature includes this.

FORM 9420-C7

CONTROL DEVICE (WET SCRUBBER)

[illegible]

INSTRUCTIONS
NON-CONTROLLED EMISSION POINT
FORM 9420-C8

- 1) **Stack ID:** Enter the unique stack ID for each uncontrolled emission point. If the stack serves several units, the same stack ID should be used to reference this stack. All stack IDs must begin with the letter S followed by a number. *Example - S21.*
- 2) **Emission Unit ID(s):** Insert emission unit ID and emission unit name from Form 9420-B1.
- 3) **Describe this Uncontrolled Emission Point:** Write a narrative of the process and emissions associated with this point.
- 4) **List All Pollutants Emitted and Rates of Emission:** Self-explanatory. Complete all calculations and rationales for these rates on Form 9420-G. Insert values where appropriate.

NOTE: Transfer all appropriate emissions data to Form 9420-E.

[illegible]

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INSTRUCTIONS
FUGITIVE EMISSIONS
FORM 9420-C9

- 1) **Emission Unit ID(s):** Insert emission unit ID and emission unit name from Form 9420-B1, if applicable, or name the source of emissions. *Example: haul road, wastewater treatment lagoon, etc.*
- 3) **Describe the Fugitive Emissions:** Write a narrative of the process and emissions associated with this.
- 4) **List All Pollutants Emitted and Rates of Emission:** Self-explanatory. Complete all calculations and rationales for these rates on Form 9420-G. Insert values where appropriate.

NOTE: For Process/Emission Point Parameters: Complete Form 9420-F. Transfer all appropriate emissions data to Form 9420-E.

FUGITIVE EMISSIONS FORM 9420-C9

[illegible]

lb/hr = pounds per hour; TPY = tons per year

INSTRUCTIONS CONTROL DEVICE (OTHER) FORM 9420-C10

STACK ID(S) – Enter the unique stack ID for each stack associated with this control device. If the stack serves several units, the same stack ID should be used to reference this stack. All stack IDs must begin with the letter S followed by a number. *Example - S21.*

POSITION IN SERIES – If there are several devices operating in a series indicate in what position this device is located. If the exhaust air stream goes through this unit and then a second unit then this would be the #1 of 2 units.

CONTROL ID – Assign a unique control device ID for this control device. All control device IDs must begin with a C followed by a number. This ID must correspond to the ID used for this control device on all other references. *Example - C1, C135.*

CONTROL DEVICE IS ASSOCIATED WITH EMISSION UNIT ID(S) – List all emission unit IDs whose emissions are controlled by this device. The ID(s) must correspond to the ID(s) indicated in Form 9440-B.

MANUFACTURER – Enter the manufacturer of the device. *Example - Buell.*

MODEL – Enter the model number of the device.

DESCRIBE CONTROL SYSTEM – Provide a brief description of the control system.

POLLUTANT COLLECTED – Enter the pollutant collected. *Example - Particulate matter.*

EFFICIENCY (%) – Enter the % of material collected of the total amount entering the device.

DETERMINATION CODE – Enter the code to represent how the efficiency was determined.

- 1 = Calculated. (Attach all calculations)
- 2 = Manufacturers specifications. (Enclose documentation)
- 3 = Source test. (Attach documentation or reference test reports already submitted to the District.

INLET TEMP (°F) – Enter the inlet temperature during normal operation.

OUTLET TEMP (°F) – Enter the outlet temperature during normal operation.

AFR (ACFM) – Enter the actual air flow rate in actual cubic feet per minute during normal operation.

DESCRIBE CLEANING METHOD – List the cleaning method(s) used.

DESCRIBE ANY MAINTENANCE PROCEDURES – Describe maintenance procedures/

DESCRIBE ANY MONITORING DEVICES, GAUGES, TEST PORTS, ETC. – Describe any stack monitoring devices, gauges, or test port locations. Provide any calibration or maintenance activities and frequency. Also describe the quality assurance procedures to prove the gauges are calibrated and operating correctly.

NOTE: For Process/Emission Point Parameters: Complete Form 9420-F. Transfer all appropriate emissions data to Form 9420-E.

FORM 9420-C10

CONTROL DEVICE (OTHER)

STACK ID(s):	Position in series of controls: # of units	Control ID:	
Control Device is associated with Emission Unit ID(s):			
Manufacturer:		Model:	
Describe Control System:			
Pollutant(s) Removed:		Efficiency (%):	Deter Code:
Inlet Temp (°F):		Outlet Temp (°F):	
Air Flow Rate (ACFM):			
Method used to determine efficiency:			
Describe Startup Procedures:			
Describe Maintenance Procedures:			
Describe any Monitoring Devices, Gauges, Test Ports, etc.:			
Include Schematic of Control Device on Separate Page			

INSTRUCTIONS FOR FORM 9420-D ALTERNATIVE OPERATING SCENARIOS

Form 9420-D must be completed for each emission unit that the source anticipates will operate under an alternative operating scenario.

EMISSION UNIT NAME – Enter the emission unit name exactly as it appears in Form 9420-B.

EMISSION UNIT ID NUMBER – Enter the unique ID number assigned to this emission unit as indicated in Form 9420-B. Example - U30

SIC CODE - Enter the SIC code associated with this operating scenario.

EMISSION POINT ID NUMBER(S) – To differentiate between an alternative operating scenario and normal operating conditions, the emission point ID(s) for alternative operating scenarios must include a letter following the ID number.

Example: E20 would be used to represent normal operations.
E20 A would indicate an alternative operating scenario. These IDs must correspond to those used in Form 9420-B. The second scenario E20 B, etc.

ALTERNATIVE OPERATING SCENARIO DESCRIPTION – Give a brief description of the alternative operating scenario associated with this emission unit and indicate what methods will be used to demonstrate compliance with all applicable requirements.

NOTE: Forms 9420-B, 9420-D, and 9420-E must be completed for each alternative operating scenario.

Complete the following for any alternative operating scenario at this source.

Emission Unit Name: _____

Emission Unit ID#: SIC Code:

Emission Point No(s): _____

Please provide a brief description of any alternative operating scenario associated with this emission unit and indicate what methods will be used to demonstrate compliance with all applicable requirements.

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

Emission Unit Name:

Emission Unit ID#: SIC Code:

Emission Point No(s): _____

Please provide a brief description of any alternative operating scenario associated with this emission unit and indicate what methods will be used to demonstrate compliance with all applicable requirements.

[illegible]

INSTRUCTIONS FOR FORM 9420-E EMISSIONS DATA

EMISSION UNIT NAME – Enter the company designated name for the emission unit. The name must be entered exactly the same way that it appears in Form 9420-B.

EMISSION UNIT ID # – Enter the company designated ID number for this emission unit. The ID number must correspond to the ID number referenced in Form 9420-B.

EIS # – Enter the unique company ID number assigned by the District.

EMISSION POINT # – Identify any emission point(s) associated with this emission unit. Enter the emission point number(s) as referenced in Form 9420-B.

REGULATED AIR POLLUTANT – List all regulated air pollutants being emitted at this source. Show all emissions, including fugitive emissions, for Carbon Monoxide (CO), Oxides of Nitrogen (NO_x), Sulfur Dioxide (SO₂), Volatile Organic Compounds (VOC), Particulate Matter (PM), Particulate Matter < 10 microns (PM₁₀), Lead, Hydrogen Sulfide, Nitrogen Dioxide, Ozone, Fluorides (as HF), Hazardous Air Pollutants (HAP), any compounds listed in section 112(r), any Class I or II substances regulated under Title VI, any Toxic Air Pollutant (TAP) regulated under 5.11 or 5.12, or any other regulated air pollutant.

CAS NUMBER – Enter the Chemical Abstracts Services (CAS) number for each pollutant.

MAXIMUM EMISSION RATE – The maximum emissions rate is the emissions that would occur operating at maximum physical capacity and continuous year round operation after control equipment. Enter the maximum emission rate using the units that are specified in the applicable regulations.

DETERMINATION METHOD – The method used to quantify emissions must be specified. If a method other than a method listed at the bottom of Form 9420-E is used, enter "6" in the appropriate column (DM) and provide the calculations used to determine the emissions for that pollutant.

REGULATORY ALLOWABLE EMISSIONS RATE – Enter the emission rate using the units that are specified in the applicable regulation. Indicate the applicable regulation number.

REQUESTED EMISSIONS RATE – Enter the **lower** of the maximum emission rate and the regulatory allowable emission rate, or if the applicant is requesting an emission rate lower than the maximum emission rate, then enter the emission rate the applicant is willing to accept as permit limits. The emission rate listed here will be identified as the allowable emission rate in the operating permit.

CONTROL – Enter Y for yes or N for no to indicate whether the emission point is controlled.

Revised 04/23/2001
Form Set 9420

1 Determination Method: 1) Stack Test 2) Material Balance 3) Standard Emission Factor (AP42)
4) Engineering Estimate 5) Special Emission Factor 6) Other: Provide Calculations

INSTRUCTIONS FOR FORM 9420-F

GEP STACK HEIGHT DETERMINATION

EXHAUST POINT INFORMATION:

- 1) **Stack ID #:** Enter the Stack ID number. Cross reference to the number on the plot plan.
- 5) **GEP Height:** Good Engineering Practice (GEP) Stack Height, as defined in 40 CFR 51.100 and 50.118, means the greater of:
 - a) 65 meters, measured from the ground-level elevation at the base of the stack;
 - b) For stacks in existence on January 12, 1979, and for which the owner or operator had obtained all applicable permits or approvals,
 $H_g = 2.5 \times H$
 - c) For all other stacks,
 $H_g = H + 1.5L$
Where
 H_g = Good engineering practice stack height, measured from the ground-level elevation at the base of the stack;
 H = Height of nearby structure(s) measured from the ground-level elevation at the base of the stack;
 L = Lesser dimension, height or projected width, of nearby structure(s).
- 6) **Diameter (or Equivalent Diameter) of Exhaust Point:** If exit point of the stack is square or rectangular, the equivalent diameter must be determined by the following formula:
$$\text{Diameter} = 1.128 \times (\text{Area of Stack Exit})^{0.5}$$
- 9) **Direction of Exhaust:** The direction that the exhaust stack directs the exhaust gas must be described here. For example, if the exhaust stack is on the side of the building with a cover point and the gas exhausts towards the ground, the direction would be stated as downward.
- 10) **UTM*:** The Universal Transverse Mercator zone and horizontal (easting) and vertical (northing) coordinates of a point at the center of the unit must be provided. Sources in Kentucky may only have a vertical coordinate ranging from 4042.000 – 4235.000 kilometers. The allowable range of horizontal values are as follows:
Zone 16: 270.0 – 769.000 kilometers
Zone 17: 23.000 – 415.000 kilometers

* UTM coordinates can be obtained by referring to a USGS Topographic Map.
- 14) If this exhaust point is utilized by other emission units or control devices, excluding the fuel combustion emission unit, they are to be listed here with their Stack ID #(s)

STACK HEIGHT DETERMINATION FORM 9420-F

EMISSION UNIT NAME: _____

EMISSIONS UNIT # _____

EMISSION POINT # _____

EXHAUST POINT INFORMATION			
1) Stack ID #:			
2) Description of exhaust point (stack, vent, roof monitor, indoors, etc.):			
3) Distance to nearest plant boundary from exhaust point discharge (feet):			
4) Discharge height above grade (feet):			
5) Good Engineering Practice (GEP) height (feet):			
6) Diameter (or equivalent diameter) of exhaust point (feet):			
7) Exit gas flow rate:	A) Maximum (ACFM):	B) Minimum (ACFM):	
8) Exit gas temperature:	A) @ maximum flow (°F):	B) @ minimum flow (°F):	
9) Direction of exhaust (vertical, lateral, downward):			
10A) UTM zone 16	B) UTM north (km):		C) UTM east (km):

Note: For a square or rectangular vent, the equivalent diameter is 1.128 times the square root of the stack's area.

BUILDING DIMENSION INFORMATION			
11) Dimensions of building on which exhaust point is located:	A) Length (feet):	B) Width (feet):	C) Height (feet):
12) Distance to nearest building (feet):			
13) Dimensions of the nearest building	A) Length (feet):	B) Width (feet):	C) Height (feet):

14) List all emission unit #s and control ID #(s) serviced by this exhaust point:	
Emission Unit/Control ID #	Stack ID #
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

INSTRUCTIONS FOR FORM 9420-G

EMISSIONS CALCULATIONS

It is important to note that emissions calculations for all air pollutants must be submitted with the permit application in order for the District to process the application. Form 9420-G must be completed for each emission unit identified in Form 9420-B and will be used to show actual and potential emissions in LB/HR, LB/DAY (if applicable) and TPY for each emission point associated with the emission unit.

COMPANY NAME. Enter the company name as it appears on the Administrative Information Form (Form 9420-A).

EMISSION UNIT NAME. Enter the name of the emission unit exactly as it appears in Form 9420-B.

EMISSION UNIT ID #. Enter the unique ID number that was assigned to this emission unit. This number must correspond to the ID number indicated in Form 9420-B.

EMISSION POINT #. List the emission point number from which the pollutant is emitted as referenced in Form 9420-B. Use the appropriate alternative operating scenario emission point number(s), if applicable.

The following example is provided for the purpose of illustrating the type of calculations that must be submitted with a FEDOOP application.

EXAMPLE: The AP-42 emission factor for emissions of SO₂ from distillate oil is 142(S) lbs/103 gal of oil burned (where S = % sulfur in the fuel). Assume that the oil has a .5% sulfur content, a 50 MMBtu/hour boiler is the emissions source, one (1) gallon of oil has a heating value of 145,000 Btu, and Section 5 of District regulation 7.06 is the applicable standard at 1 lb/MMBtu. The actual operating hours for this plant is 16 hours/day, 5 days/week, 50 weeks/year. There are no hourly or annual fuel restrictions and there are no limitations on the hours of operation.

Potential SO₂ emissions (lb/hr): Assume the boiler has no hourly fuel use restrictions and 0.5% is the maximum sulfur content of any oil to be burned. Potential emissions are based on any permitted maximums you have entered in the throughput or operating data for this unit in Form 9420-B.

$$\frac{50 \text{ MMBtu}}{\text{hr}} \times \frac{1 \text{ gal}}{145,000 \text{ Btu}} = \frac{344.8 \text{ gal}}{\text{hr}}$$

*If available, compare this number to boiler rating for gal of oil which can be burned per hour. Note any discrepancy.

$$\frac{344.8 \text{ gal}}{\text{hr}} \times \frac{142 \times (.5) \text{ lb}}{1000 \text{ gal}} = \frac{24.48 \text{ lb}}{\text{hr}}$$

Potential SO₂ emissions (lb/day): Not Applicable

Potential SO₂ emissions (TPY):

$$\frac{24.48 \text{ lb}}{\text{hr}} \times \frac{8,760 \text{ hr}}{\text{year}} = \frac{214,445 \text{ lb}}{\text{year}}$$

EMISSIONS CALCULATIONS (cont.)

$$\frac{214,445 \text{ lb}}{\text{year}} \times \frac{1 \text{ ton}}{2,000 \text{ lb}} = 107.2 \text{ TPY}$$

Actual SO₂ emissions (lb/hr): Assuming the boiler burns 1,000,000 gallons of oil per year with a maximum sulfur content of 0.5%:

$$\frac{1,000,000 \text{ gal}}{\text{year}} \times \frac{1 \text{ year}}{4,000 \text{ hr}} = \frac{250 \text{ gal}}{\text{hr}} \times \frac{142 \times (.5) \text{ lb}}{1000 \text{ gal}} = 17.75 \text{ lbs/hr}$$

Actual SO₂ emissions (TPY):

$$\frac{1,000,000 \text{ gal}}{\text{year}} \times \frac{142 \times (0.5) \text{ lb}}{1000 \text{ gal}} = \frac{71,000 \text{ lb}}{\text{year}} \times \frac{1 \text{ ton}}{2,000 \text{ lb}} = 35.5 \text{ TPY}$$

Suppose you had a permitted fuel restriction of 1.4 E6 gallons of #2 distillate oil per year, then your potential TPY emissions would be:

$$\frac{1,400,000 \text{ gal}}{\text{year}} \times \frac{142 \times (0.5) \text{ lb}}{1,000 \text{ gal}} = \frac{99,400 \text{ lb}}{\text{year}}$$

$$\frac{99,400 \text{ lb}}{\text{year}} \times \frac{1 \text{ ton}}{2,000 \text{ lb}} = 49.7 \text{ TPY}$$

POTENTIAL EMISSIONS (Units of Standard):

$$\frac{1 \text{ gal}}{145,000 \text{ Btu}} \times \frac{142 \times 0.5 \text{ lb SO}_2 \text{ emissions}}{1000 \text{ gal}} = \frac{71 \text{ lb SO}_2}{145 \text{ MMBtu}} = \frac{0.49 \text{ lb SO}_2}{\text{MMBtu}}$$

NOTE: CO, NO_x, and VOC are calculated the same way, using emission factors from AP-42.

EMISSIONS CALCULATIONS FORM 9420-G

Company Name: _____

Emission Unit Name: _____

Emission Unit ID #: _____

Emission Point #: _____

Emission Point #: _____

INSTRUCTIONS FOR FORM 9420-H EMISSIONS SUMMARY

This form is used to total the emissions of all regulated air pollutants from all emission units at this source in order to evaluate annual emissions for applicability to the Federal Clean Air Act and its Amendments of 1990.

Source Wide Summary of all Criteria Air Pollutants Regulated by the CAA of 1990:

Emission Unit ID(s): List all Emission Unit ID(s) associated with this pollutant.

Stack ID(s): List all Stack ID(s) which emit this pollutant, if any.

Control ID(s): List all Control ID(s) which control the emissions of this pollutant, if any.

Emissions (lbs/hr):

Actual: For each pollutant, total all of the actual emissions in lbs/hr, as calculated on Form 9420-G, and enter the sum here.

Potential: For each pollutant, total all of the potential emissions in lbs/hr, as calculated on Form 9420-G, and enter the sum here.

Emissions (tons/yr):

Actual: Convert the actual emissions from lbs/hr to tons/yr and enter here.

Potential: Convert the potential emissions from lbs/hr to tons/yr and enter here.

Source Wide Summary of all Non-Criteria Air Pollutants Regulated by the CAA of 1990:

Total: All Pollutants Regulated Under 112(b) of the CAA:

Emissions (lbs/hr):

Actual: Sum all of the actual lbs/hr emissions for pollutants in which the 'HAP' column is checked on the following page(s) of this form.

Potential: Sum all of the potential lbs/hr emissions for pollutants in which the 'HAP' column is checked on the following page(s) of this form.

Emissions (tons/yr):

Actual: Convert the actual emissions from lbs/hr to tons/yr and enter here.

Potential: Convert the potential emissions from lbs/hr to tons/yr and enter here.

Total: Pollutants Only Regulated Under 112(r) of the CAA:

Emissions (lbs/hr):

Actual: Sum all of the actual lbs/hr emissions for pollutants in which the '112(r)' column is the **only** column checked on the following page(s) of this form.

Potential: Sum all of the potential lbs/hr emissions for pollutants in which the '112(r)' column is the **only** column checked on the following page(s) of this form.

Emissions (tons/yr):

Actual: Convert the actual emissions from lbs/hr to tons/yr and enter here.

Potential: Convert the potential emissions from lbs/hr to tons/yr and enter here.

Total: Pollutants Only Regulated Under Title VI of the CAA:

Emissions (lbs/hr):

Actual: Sum all of the actual lbs/hr emissions for pollutants in which the 'VI' column is the **only** column checked on the following page(s) of this form.

Potential: Sum all of the potential lbs/hr emissions for pollutants in which the 'VI' column is the **only** column checked on the following page(s) of this form.

Emissions (tons/yr):

Actual: Convert the actual emissions from lbs/hr to tons/yr and enter here.

Potential: Convert the potential emissions from lbs/hr to tons/yr and enter here.

EMISSIONS SUMMARY (cont.)

Total: Volatile Organic Compounds (VOC):

Emissions (lbs/hr):

Actual: Sum all of the actual lbs/hr emissions for pollutants in which the 'VOC' column is checked on the following page(s) of this form.

Potential: Sum all of the potential lbs/hr emissions for pollutants in which the 'VOC' column is checked on the following page(s) of this form.

Emissions (tons/yr):

Actual: Convert the actual emissions from lbs/hr to tons/yr and enter here.

Potential: Convert the potential emissions from lbs/hr to tons/yr and enter here.

Pollutant: List all regulated pollutants not previously listed on page 1 of this form.

CAS Number: List the CAS number for each regulated air pollutant. This is the Chemical Abstract Service Registry Number assigned to each constituent by the American Chemical Society.

VOC: Place an 'x' in this column if the pollutant is a Volatile Organic Compound.

TAP: Place an 'x' in this column if the pollutant is regulated as a Toxic Air Pollutant under District Regulations 5.11 or 5.12.

HAP: Place an 'x' in this column if the pollutant is regulated as a Hazardous Air Pollutant under Section 112(b) of the CAA.

112(r): Place an 'x' in this column if the pollutant is regulated pursuant to Section 112(r) of the CAA and 40 CFR 68.

VI: Place an 'x' in this column if the pollutant is regulated under Title VI of the CAA.

Note: Multiples of this form shall be used, as needed.

Example:

NON-CRITERIA POLLUTANT	CAS NUMBER	VOC	TAP	112 (b) HAP	112 (r)	VI	EMISSION UNIT ID(S)	STACK ID(S)	CONTROL ID(S)	EMISSIONS			
										(lb/hr)		(tons/year)	
										ACT.	POT.	ACT.	POT.
Methyl methacrylate	80-62-6	x	x	x			U2, U7, U10	S5	C3	5.10	10.00	15.59	43.58

EMISSIONS SUMMARY FORM 9420-H

EIS # _____ Page 1 of _____

SOURCE WIDE SUMMARY OF ALL CRITERIA AIR POLLUTANTS REGULATED BY THE CAA OF 1990							
		STACK	CONTROL	EMISSIONS (LBS/HR)		EMISSIONS (TONS/YR)	
POLLUTANT	EMISSION UNIT ID(S)	ID(S)	ID(S)	ACTUAL	POTENTIAL	ACTUAL	POTENTIAL
PM							
CO							
NOx							
SO ₂							
LEAD							
FLUORIDES (as HF)							

SOURCE WIDE SUMMARY OF ALL NON-CRITERIA AIR POLLUTANTS REGULATED BY THE CAA OF 1990					
	EMISSIONS (LBS/HR)		EMISSIONS (TONS/YR)		
	ACTUAL	POTENTIAL	ACTUAL	POTENTIAL	
TOTAL: ALL POLLUTANTS REGULATED UNDER 112(b) OF THE CAA					
TOTAL: POLLUTANTS ONLY REGULATED UNDER 112(f) OF THE CAA					
TOTAL: POLLUTANTS ONLY REGULATED UNDER FEDERALLY ENFORCEABLE DISTRICT-ORIGIN OF THE CAA					
TOTAL: VOLATILE ORGANIC COMPOUNDS (VOC)					

EIS # _____ Page _____ of _____

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INSTRUCTIONS FORM 9420-I

APPLICABLE REQUIREMENTS

Applicable Regulations:

Applicable local and/or federal regulations governing emissions for the mode of operation for the emission unit must be stated. The regulated air pollutant (VOC, NO_x, HAP, TAP, etc.), applicable regulation, and requirement(s) of the regulation(s) must be furnished.

- 2) Examples of emission standards and limitations set by regulation would be:

<u>Pollutant(s)</u>	<u>Applicable Regulation</u>	<u>Emission Standard</u>
VOC	7.59 Section 5 (5.12)	3.5 lbs/gal maximum regulation VOC content

- 3) An example of a recordkeeping regulation would be:

<u>Pollutant(s)</u>	<u>Applicable Regulation</u>	<u>Requirement(s)</u>
VOC	7.59 Section 8	Daily records application method and substrate type, amount and type of coating, VOC content, etc.

- 4) An example of a reporting regulation would be:

<u>Pollutant(s)</u>	<u>Applicable Regulation</u>	<u>Requirement(s)</u>
All specified air contaminants	40 CFR 60 Subpart I, 60.49b	Periodic emission reports at intervals prescribed by the District.

- 5) An example of a monitoring regulation would be:

<u>Pollutant(s)</u>	<u>Applicable Regulation</u>	<u>Requirement(s)</u>
Particulates	40 CFR 60 Subpart F, 60.63(a)	Record daily production and feed rates.

- 6) An example of a testing regulation would be:

<u>Pollutant(s)</u>	<u>Applicable Regulation</u>	<u>Requirement(s)</u>
PM	40 CFR 60 Subpart Db	Demonstrate compliance with 40 CFR 60 Subpart Db - 60.43b and 60.44b using methods specified in Subpart Db 60.46b.

An example of an exemption from an otherwise applicable requirement would be District Regulation 7.59, Section 5 which exempts a coating line from the regulation if the total VOC emissions from all coating lines that would otherwise be subject to less than five (5) tons per year.

APPLICABLE REQUIREMENTS FORM 9420-I

EMISSION UNIT NAME: _____

EMISSIONS UNIT ID # _____

EMISSION POINT # _____

- 1) Provide a description of any conditions or restrictions on operation which affect emissions or operations: (e.g. only one unit is operated at a time)

APPLICABLE REGULATIONS

- 2) Provide any specific emission standard(s) and limitations set by regulation(s) which are applicable to this emission unit (e.g. Volatile Organic Compound content of coating not to exceed 3.5 lb/gal):

Pollutant(s)	Applicable Regulation	Emission Standard

- 3) Provide any specific recordkeeping requirement which is applicable to this emission unit.

Pollutant(s)	Applicable Regulation	Requirement(s)

- 4) Provide any specific reporting requirement which is applicable to this emission unit.

Pollutant(s)	Applicable Regulation	Requirement(s)

- 5) Provide any specific monitoring requirement which is applicable to this emission unit.

Pollutant(s)	Applicable Regulation	Requirement(s)

- 6) Provide any specific testing requirement which is applicable to this emission unit.

Pollutant(s)	Applicable Regulation	Requirement(s)

INSTRUCTIONS FOR FORM 9420-J INSIGNIFICANT ACTIVITIES SUMMARY

It is important to note that prior to completing Form 9420-J, the applicant should review District Regulations 2.16 and 2.02.

Form 9420-J is required for sources applying for a permit for the first time.

Section 2.0 of District Regulation 2.02 identifies certain activities which may be considered insignificant and are exempt from the permit requirements. **However, those activities which are exempt from an applicable federal or local rule due to size, emission levels or production rates must be identified and reported on the permit application.**

Example: A nine (9) MMBtu/HR boiler firing #2 distillate oil is a source category type for which a regulation has been promulgated. In this case, 40 CFR 60 Subpart D and District regulation 7.06. However, because of the size and emission levels of the boiler, it is exempt from the requirements of both regulations, but must be identified and reported in the permit application.

Note: Exemptions are not allowed if an emission unit is subject to any requirements under New Source Performance Standards (NSPS), NESHAP, PSD, OffSet, 40 CFR 63 (MACT/GACT) or District Regulations 5.11 or 5.12.

INSIGNIFICANT ACTIVITIES SUMMARY Form 9420-J

FACILITY TYPE	# UNITS	PRODUCTS STORED
VOC STORAGE TANKS 250 GAL OR LESS		
STORAGE TANKS FUEL OR LUBRICATING OILS WITH V.P. < 10 MM HG AT 20 DEG CELSIUS		
PRESSURIZED VOC STORAGE VESSELS		
STORAGE TANKS - DIESEL OR FUEL OIL - NOT FOR SALE RESALE OR DISTRIBUTION - ANNUAL TURNOVER < 2X CAPACITY		
COMBUSTION SOURCES < 10 MMBtu/HR		FUEL(S)
RESEARCH & DEVELOPMENT (R&D) ACTIVITIES		POTENTIAL EMISSIONS (TPY) - ALL REGULATED AIR POLLUTANTS CIRCLE ONE: <5 <10 >10 >20 >25

INDICATE WHICH OF THE FOLLOWING FACILITY TYPES ARE OPERATING AT YOUR PLANT BY PLACING AN 'X' IN THE APPROPRIATE COLUMN.

FACILITY TYPE	YES	NO	
INTERNAL COMBUSTION ENGINES FIXED OR MOBILE			IDENTIFY ANY OTHER ACTIVITIES THAT YOU BELIEVE SHOULD BE LISTED IN THE APPLICATION AND THE BASIS FOR INSIGNIFICANCE
PRESSES EXTRUDING METAL/MINERAL/WOOD			
BRAZING, SOLDERING, OR WELDING EQUIP.			
WOODWORKING, EXCEPT FOR CONVEYING HOGGING OR BURING WOOD/SAWDUST			
FOUNDRY CORE-MAKING EQUIPMENT - NO HEAT APPLIED AND NO EMISSION STANDARD			
OVENS FOR CURING POTTING MATERIALS OR CASTINGS MADE WITH EPOXY RESINS			
PLASTICS - COMPRESSION OR INJ MOLDING			
DIPPING OPERATIONS - COATING OBJECTS WITH			
EMERGENCY RELIEF VENTS OR VENTILATING SYSTEMS (NOT OTHERWISE REGULATED)			
LAB VENTILATING & EXHAUSTING SYSTEMS NON RADIOACTIVE MATERIALS			
VENTILATION SYS - BAKERIES & RESTAURANTS			
BLAST CLEANING - ABRASIVES IN H ₂ O			
HEAT TREATING, SOAKING, CASE HARDENING OR SURFACE CONDITIONING OF METAL OBJECTS NATURAL OR LP GAS ONLY			
WASHING OR DRYING FABRICATED METAL OR GLASS NON VOC USE & NO OIL OR SOLID FUEL			
RESIDENTIAL/DOMESTIC EQUIPMENT			
PORCELAIN ENAMEL OVENS/FURNACES VITREOUS ENAMELING FURNACES/OVENS			
CRUCIBLE OR POT FURNACES <450 CUBIC INCHES - ANY MOLTEN METAL			
FACILITIES USING PEANUT, SUNFLOWER, COTTONSEED, OR CANOLA OILS - NON VOC			
SOIL OR GROUNDWATER CONTAM REMEDIATION			
INDOOR PM COLLECTORS VENTING INDOORS NON 5.11, 5.12, OR 5.14 REGULATED MATERIAL			
COLD SOLVENT PARTS CLEANERS - SECONDARY RESERVOIR			
PORTABLE DIESEL OR GASOLINE STORAGE TANKS			

INSTRUCTIONS FOR FORM 9420-K COMPLIANCE MONITORING DEVICES AND ACTIVITIES

TESTING, MONITORING, RECORDKEEPING, AND REPORTING:

- 1) Examples of recorded parameters and frequency of such records would be as follows:

<u>Parameter</u>	<u>Frequency</u>
Fuel use	Recorded on a daily basis
NOx Content of Fuel	Recorded on a monthly basis

- 2) The method used to create and maintain records must be described. An example of such description would be as follows:

<u>Parameter</u>	<u>Method of Measurement</u>	<u>Person Responsible for Maintenance</u>	<u>Method of Recording</u>	<u>Person Responsible for Recording</u>
Fuel use	Flow Meter	Plant Manager	Continuous Recorder	Plant Manager

- 4) All records must be available at the source for inspection by the District, and copying or submittal to the District upon request.

- 5) The length of time records are retained from date of entry must be stated. For example, the fuel use records are retained two years from the date they are recorded.

- 6) The type, measured parameter, and location of each monitor must be stated. An example would be as follows:

Type – Continuous Opacity Monitor
Measured Parameter – Opacity
Location – Stack Exit.

- 12) Any stack tests performed on this unit in the past need to be described here. An example of a stack test description would be as follows:

<u>Test Date</u>	<u>Test Method</u>	<u>Firm</u>	<u>Operating Conditions</u>	<u>Summary of Results</u>
4/10/99	USEPA-7	ABC, Inc.	Full Capacity	Max No _x = .12 lb/MM BTU

- 13) A description of all reporting requirements must be given. An example of a reporting requirement description would be as follows:

<u>Reporting Requirements</u>	<u>Title of Report</u>	<u>Frequency</u>
Sulfur content of fuels used	Fuel Sulfur Content	Annually

COMPLIANCE MONITORING DEVICES AND ACTIVITIES FORM 9420-K

EMISSION UNIT NAME: _____

EMISSIONS UNIT ID # _____

EMISSION POINT # _____

TESTING, MONITORING, RECORDKEEPING, AND REPORTING															
<p>1) List the parameters on which records are being maintained and the frequency of such records (e.g., hourly, daily, weekly) so that compliance can be demonstrated:</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: center; padding: 5px;">Parameter</th> <th style="width: 50%; text-align: center; padding: 5px;">Frequency</th> </tr> </thead> <tbody> <tr><td style="border-bottom: 1px solid black; height: 20px;"></td><td style="border-bottom: 1px solid black; height: 20px;"></td></tr> <tr><td style="border-bottom: 1px solid black; height: 20px;"></td><td style="border-bottom: 1px solid black; height: 20px;"></td></tr> <tr><td style="border-bottom: 1px solid black; height: 20px;"></td><td style="border-bottom: 1px solid black; height: 20px;"></td></tr> <tr><td style="border-bottom: 1px solid black; height: 20px;"></td><td style="border-bottom: 1px solid black; height: 20px;"></td></tr> <tr><td style="border-bottom: 1px solid black; height: 20px;"></td><td style="border-bottom: 1px solid black; height: 20px;"></td></tr> <tr><td style="border-bottom: 1px solid black; height: 20px;"></td><td style="border-bottom: 1px solid black; height: 20px;"></td></tr> </tbody> </table>		Parameter	Frequency												
Parameter	Frequency														
<p>2) Briefly describe the method by which records will be created and maintained. For each recorded parameter, include the method of measurement, responsible person for maintenance, method of recording, and responsible person:</p> <div style="height: 60px; border: 1px solid black;"></div>															
<p>3) Is compliance of the emission unit readily demonstrated by review of the records? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, explain:</p> <div style="height: 40px; border: 1px solid black;"></div>															
<p>4) Are all records readily available for inspection, copying, and/or submittal to the District upon request? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, explain:</p> <div style="height: 40px; border: 1px solid black;"></div>															
<p>5) Indicate the length of time records are retained from the date of entry:</p> <div style="height: 40px; border: 1px solid black;"></div>															
<p>6) Describe any emission monitors used, including any opacity and oxygen/CO₂ analyzers:</p> <div style="height: 60px; border: 1px solid black;"></div>															
<p>7) What operating parameter(s) is(are) being monitored (e.g. combustion chamber temperature)?</p> <div style="height: 60px; border: 1px solid black;"></div>															
<p>8) Describe the location of each monitor:</p> <div style="height: 60px; border: 1px solid black;"></div>															
<p>9) Is each monitor equipped with a recording device? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If no, list all monitors without a recording device.</p> <div style="height: 40px; border: 1px solid black;"></div>															

COMPLIANCE MONITORING DEVICES AND ACTIVITIES

FORM 9420-K

(continued)

10) Is each monitor reviewed for accuracy at least quarterly? If no, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No																					
11) Is each monitor operated at all times that the associated emission unit is operated? If no, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No																					
12) Describe any tests which have been performed in the past to quantify emissions. Include the date of the test, methods and procedures used, testing company, operating conditions existing during the test, and a summary of results. If additional space is needed, attach and label as exhibit _____.																						
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%; text-align: left;">Test Date</th> <th style="width: 35%; text-align: left;">Test Method</th> <th style="width: 25%; text-align: left;">Firm</th> <th style="width: 25%; text-align: left;">Operating Conditions</th> </tr> <tr> <td style="border: 1px solid black; height: 20px; text-align: center;">/ /</td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> <td style="border-bottom: 1px solid black;"></td> </tr> </table>	Test Date	Test Method	Firm	Operating Conditions	/ /				Summary of results: _____													
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13) Describe all reporting requirements and provide the title and frequency of report submittals:																						
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 40%; text-align: left;">Reporting Requirements</th> <th style="width: 30%; text-align: left;">Title of Report</th> <th style="width: 30%; text-align: left;">Frequency</th> </tr> <tr><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td></tr> <tr><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td><td style="border-bottom: 1px solid black;"></td></tr> </table>	Reporting Requirements	Title of Report	Frequency																			
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INSTRUCTIONS FOR FORM 9420-L COMPLIANCE STATUS

PURPOSE OF COMPLIANCE STATUS FORM

The Air Pollution Control District requires that an applicant submit a Compliance Status form (Form 9420-L) for all emission units at a source, regardless of the compliance status of the emission unit.

Source Information

Identify the source location. This information should be identical to information on the FEDERALLY ENFORCEABLE DISTRICT-ORIGIN Form 9420-A.

Note: Items which are self-explanatory are not addressed.

- 1) **Source Name:** The company name, or specific plant name if different from company name, must be provided.
- 2) **Source Street Address:** This must be the actual street address of the source. P.O. boxes are not acceptable.

Note: The ID number requested in the following sections refers to the number assigned to each unit by the applicant, not the number assigned to the source by the District.

- 5) **Emission Units in Compliance:** The applicant must identify and report all emission units at this source that are currently in compliance with all applicable requirements and will continue to comply with such requirements during the permit term. Also, they will not be subject to any future compliance dates during the permit term. An example would be:

<u>Emission Unit No.</u>	<u>Emission Point No.</u>	<u>Emission Unit Description</u>
U4	E1	Heatset Web-Offset Lithographic Printing Press #4
U5	E6	Rotogravure Printing Press #5

- 6) **Emission Units in Compliance But Subject to Future Compliance Dates:** The applicant must identify and report all emission units at this source which are currently in compliance with all applicable requirements but are subject to future compliance dates that will become applicable during the permit term. These emission units must achieve compliance on a timely basis and maintain compliance by these future compliance dates as they become applicable. An example would be:

<u>Emission Unit No.</u>	<u>Emission Point No.</u>	<u>Emission Unit Description</u>	<u>Future Compliance Date</u>
U1	E1	Can Coating Line #1	01/01/2002

- 7a) **Emission Units not in Compliance - Compliance to be Achieved Prior to Permit Issuance:** The applicant must identify and report all emission units at this source that are not in compliance with all applicable requirements at the time of permit application. These emission units must continue to comply with such requirements during the permit term. A compliance schedule Form 9420-M must be completed for each emission unit that falls into this category. An example would be:

<u>Emission Unit No.</u>	<u>Emission Point No.</u>	<u>Emission Unit Description</u>	<u>Date Compliance to be Achieved</u>
U10	E10	Incinerator Unit 1	07/01/2001

COMPLIANCE STATUS (cont.)

- 7b) **Method of Compliance:** The applicant must provide a narrative description of how the emission unit(s) in 7a will achieve compliance prior to permit issuance. An example would be:

The incinerator, unit 1, is currently out of compliance with District Regulation 7.78 Section 3 (3.3.1) as per the stack test performed 08/04/01. At the time this test was performed, the incinerator was not equipped with an electrostatic precipitator. By 07/01/02, this incinerator will have been equipped with an electrostatic precipitator, and a stack test will have been performed to demonstrate compliance with the applicable standard.

- 8a) **Emission Units not in Compliance - Compliance Will Not be Achieved Prior to Permit Issuance:** The applicant must provide all emission units at this source that are currently out of compliance with any applicable requirements and will not achieve compliance prior to permit issuance. A Compliance Schedule Form 9420-M must be completed for each emission unit that falls into this category. An example would be:

<u>Emission Unit No.</u>	<u>Emission Point No.</u>	<u>Emission Unit Description</u>	<u>Date Compliance Scheduled to be Achieved</u>
U7	E3	Paper Coating Line #1	12/30/2001

- 8b) **Method of Compliance:** The applicant must provide a narrative description of how the emission unit(s) in 8a will achieve compliance. An example would be:

Paper coating line #1 is currently out of compliance. Currently all coatings used on this line are out of compliance with the 2.9 lb/gal VOC content limit. Therefore, an afterburner will be installed. This capture system and afterburner will provide at least 81 percent reduction in the overall emissions of VOC from the coating line and the afterburner will be at least 90 percent efficient in order to comply. The capture system will demonstrate compliance through the coating analysis and capture system and afterburner test methods specified in the applicable regulation and reporting requirements. The afterburner will be equipped with a continuous monitor of combustion chamber temperature in accordance with applicable requirements. All this will be completed by 12/30/2001. Submittal of Form 9420-M, to show interim dates and final completion date, will be required.

COMPLIANCE STATUS FORM 9420-L

COMPLIANCE STATUS	FOR DISTRICT USE ONLY
	EIS NO:
	PERMIT NO:
	DATE RECEIVED:

SOURCE INFORMATION	
1) Applicant Name:	
2) Source Street Address:	
3) City:	4) Date Form Prepared:

The Air Pollution Control District of Jefferson County requires each applicant for a federally enforceable District-origin operating permit to complete a compliance status form for each emission unit regardless of its compliance status. The compliance status of each emission unit must be stated and compliance schedule Form 9420-I must be completed and submitted for emission units in noncompliance at the time application is made.

5)	EMISSION UNITS IN COMPLIANCE The following emission units are in compliance with all applicable requirements and will continue to comply with such requirements during the permit term:																																	
	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%; text-align: center; font-size: small;">EMISSION UNIT NO.:</th> <th style="width: 15%; text-align: center; font-size: small;">EMISSION POINT NO.:</th> <th style="width: 65%; text-align: center; font-size: small;">EMISSION UNIT DESCRIPTION</th> </tr> </thead> <tbody> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td></tr> </tbody> </table>	EMISSION UNIT NO.:	EMISSION POINT NO.:	EMISSION UNIT DESCRIPTION	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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6)	EMISSION UNITS IN COMPLIANCE BUT SUBJECT TO FUTURE COMPLIANCE DATES The following emission units, which are currently in compliance with all applicable requirements, will achieve on a timely basis and maintain compliance with future compliance dates as they become applicable during the permit term:																																	
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_____	_____	_____	_____																															

COMPLIANCE STATUS FORM 9420-L

(continued)

7a) EMISSION UNITS NOT IN COMPLIANCE – COMPLIANCE TO BE ACHIEVED PRIOR TO PERMIT ISSUANCE

The following emission units are not in compliance with all applicable requirements at the time of permit application. However, these emission units will achieve compliance with all applicable requirements prior to permit issuance and will continue to comply with such requirements during the permit term. Form 9420-M (FEDERALLY ENFORCEABLE DISTRICT-ORIGIN – Compliance Schedule) must be submitted for emission units not in compliance with all applicable requirements at the time of permit application submittal.

EMISSION UNIT NO.:	EMISSION POINT NO.:	EMISSION UNIT DESCRIPTION	DATE COMPLIANCE TO BE ACHIEVED
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- b) The following is a narrative description of how compliance will be achieved for each of the emission units listed in 7(a) above. If additional space is needed, attach and label as exhibit _____.

8a) EMISSION UNITS NOT IN COMPLIANCE – COMPLIANCE WILL NOT BE ACHIEVED PRIOR TO PERMIT ISSUANCE

The following emission units are not in compliance with all applicable requirements at the time of permit issuance. Form 9420-M (FEDERALLY ENFORCEABLE DISTRICT-ORIGIN – Compliance Schedule) must be submitted for emission units not in compliance with all applicable requirements at the time of permit issuance. Form 9420-M is submitted for the following emission units.

EMISSION UNIT NO.:	EMISSION POINT NO.:	EMISSION UNIT DESCRIPTION	DATE COMPLIANCE TO BE ACHIEVED
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- b) The following is a narrative description of how compliance will be achieved for each of the emission units listed in 8(a) above. If additional space is needed, attach and label as exhibit _____.

INSTRUCTIONS FOR FORM 9420-M COMPLIANCE SCHEDULE FOR NONCOMPLYING EMISSION UNITS

PURPOSE

This form must be submitted for each emission unit not in compliance with all applicable requirements at the time of permit application submittal.

Note: Items which are self explanatory are not addressed.

Source Information

This information should be identical to the information stated in Form 9420-A.

- 1) **Source Name:** The company name, or specific plant name if different from the company name, must be provided.
- 2) **Source Street Address:** This must be the actual street address of the source. P.O. boxes are not acceptable.
- 5) **Construction Permit Number:** If any of the modifications to this emission unit will require a construction permit under the provisions of District Regulation 2.03, then such permit will have to be obtained before the modification can begin.
- 7) **Emission Unit Description:** The description of the emission unit must include as a minimum, the plot plan designation, emission unit name, and any other useful information that can be helpful in cross referencing this unit with other applicable application forms. This information must be identical to that which appears in emission unit Form 9420-B1.
- 8) **Applicable Requirements:** The applicant must provide a list of all Federal and local applicable requirements for which this emission unit is not in compliance. This list must include a description of the requirements, the title of the applicable regulation, and the compliance date required in the applicable regulation. An example would be:

<u>Listing of Applicable Requirements with which the emission unit does not comply</u>	<u>Applicable Regulation</u>	<u>Compliance Date</u>
a) Emission capture and control equipment which achieves an overall emission rate of less than 2.34 lbs/hr.	7.08	09/01/76
b) The owner or operator must demonstrate to the District that the unit complies with a 2.34 lb/hr emission limit.	7.08	09/01/76

- 9) **Compliance Methods:** The applicant must provide a detailed description of how compliance will be achieved with the applicable requirements listed in item 8 of this form. An example would be:

The rock crusher will comply with District Regulation 7.08 by installing a capture system and baghouse that will reduce PM emissions to less than 2.34 lbs/hr, as required by 7.08. Compliance with the overall control requirement of 7.08 will be demonstrated by applicable test methods. In order to comply with 7.08, records will be maintained from the opacity monitor and the operating time for the capture system and the monitoring equipment. Also, a maintenance log for the capture system, baghouse, and monitoring equipment will be maintained.

COMPLIANCE SCHEDULE (cont.)

- 10) **Intermediate Steps or Milestones:** The applicant must provide all intermediate steps or milestones, including the expected or actual date of completion, involved in bringing the unit into compliance with all applicable requirements. The date of completion should be estimated if the step or milestone has not been completed.
- 11) **Overall Compliance Demonstration:** The applicant must describe all methods used to demonstrate compliance with all applicable requirements for this emission unit.

COMPLIANCE SCHEDULE FOR NONCOMPLYING EMISSION UNITS FORM 9420-M

COMPLIANCE SCHEDULE FOR NONCOMPLYING EMISSION UNITS	FOR DISTRICT USE ONLY
	EIS NO:
	PERMIT NO:
	DATE RECEIVED:

SOURCE INFORMATION	
1) Source Name:	
2) Source Street Address:	
3) City:	4) Date Form Prepared:
5) Construction Permit No. (if applicable):	6) Emission Unit ID #:
7) Describe the Applicable Emission Unit:	

8) Listing of Applicable Requirements with which the emission unit does not comply:	Applicable Regulation #	Required Compliance Date
a) _____ _____		/ /
b) _____ _____		/ /
c) _____ _____		/ /
d) _____ _____		/ /
e) _____ _____		/ /

9) Detailed Description of Methods Used to Achieve Compliance: _____ _____ _____ _____ _____ _____ _____ _____
--

**COMPLIANCE SCHEDULE
FOR NONCOMPLYING EMISSION UNITS
FORM 9420-M
(Continued)**

10) Intermediate Steps or Milestones:	Date of Completion
A) Preliminary evaluation of process change completed:	
B) Binding agreement entered into to alter emission unit:	
C) Construction permit applied for air pollution control equipment for this emission unit or equipment to replace this emission unit:	
D) New equipment delivered to the source. If present equipment was altered, state date such alteration began:	
E) Construction of new equipment completed:	
F) Alteration of existing equipment completed:	
G) Emission unit tested to demonstrate compliance with the applicable requirements:	
H) Other (Describe):	
I) Other (Describe):	
J) Other (Describe):	
K) Equipment fully operational and in full compliance:	

[illegible]

12) Is there a District Board Order currently in effect for this emission unit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If so, does this compliance schedule meet the conditions of the Board Order?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

INSTRUCTIONS FOR FORM 9420-N CERTIFIED PROGRESS REPORT

PURPOSE

This form must be completed for each item of equipment being constructed or modified in accordance with Form 9420-M, **FEDERALLY ENFORCEABLE DISTRICT-ORIGIN Compliance Schedule**, pursuant to District Regulation 2.16. It should be noted that the reporting period for this report must be provided in the block at the top left of the form.

Note: Items which are self explanatory are not addressed.

Source Information: This information should be identical to the information stated in Form 9420-A.

- 1) **Source Name:** The company name, or specific plant name if different from the company name, must be provided.
- 2) **Source Street Address:** This must be the actual street address of the source. P.O. boxes are not acceptable.
- 5) **Construction Permit Number:** If a construction permit is required under the provisions of District Regulation 2.03, then such permit will have to be obtained before the construction or modification can begin.
- 6 & 7) **Emission Unit Description:** The description of the emission unit must include as a minimum, the flow diagram designation, emission unit name, and any other useful information that can be helpful in cross referencing this unit with other applicable application forms. This information must be identical to that which appears in emission unit forms.
- 8) **Compliance Activities:** The applicant must provide all activities leading to compliance that have been performed during this reporting period, as indicated at the top of this form. The dates and periods of time for each activity must be furnished. If the activity was completed, this must be indicated. An example would be:
Preliminary evaluation of changing control equipment completed – 1/15/2001
Binding agreement entered into to replace afterburner – 1/30/2001
Construction permit applied for new afterburner – present
- 9A) **Milestones:** The applicant must provide all milestones or intermediate steps scheduled to be completed during this reporting period or actually completed during this reporting period. The scheduled completion dates for milestones should be identical to those provided in Form 9420-M, **FEDERALLY ENFORCEABLE DISTRICT-ORIGIN Compliance Schedule**. An example would be:

<u>Milestone</u>	<u>Scheduled Completion Date</u>	<u>Actual Completion Date, if Completed</u>
Preliminary evaluation of changing control equipment contract.	1/15/2001	1/15/2001
Binding agreement entered into to replace afterburner.	1/30/2001	1/30/2001
Construction permit for new afterburner applied for.	2/15/2001	Delayed to 2/25/2001

- 9B) **Reasons for Not Meeting Milestones:** If any scheduled completion dates for milestones were not met, the applicant must provide reasons why this occurred. An example would be:

The construction permit was not submitted by 7/15/2001 because the actual size and model of the unit was not finalized until 7/10/2001.

CERTIFIED PROGRESS REPORT

(continued)

- 10A) **Future Milestones:** The applicant must provide all milestones or intermediate steps scheduled to be completed in the future that may not be met. The scheduled completion dates for the milestones should be identical to those provided in Form 9420-M, Compliance Schedule for Noncomplying Emission Units. An example would be:

<u>Milestone</u>	<u>Scheduled Completion Date</u>	<u>Anticipated Completion Date</u>
New Afterburner delivered to source	5/30/2002	6/30/2002
Construction of new afterburner completed	11/30/2002	12/30/2002
Changes to existing equipment completed	11/30/2002	12/30/2002
Destruction efficiency of afterburner tested	2/30/2003	3/30/2003

- 10B) **Reasons for Not Meeting Milestones:** If any scheduled completion dates for milestones that may not be met, the applicant must provide reasons why this will occur. An example would be:

The afterburner will not be delivered, constructed, or tested on time because the actual size and model of the unit was not finalized until 2/10/2002. This caused everything scheduled after the submittal of the construction permit application to be delayed one month.

SIGNATURE BLOCK:

- 11) The application must be signed by a responsible official of the source and dated. In general, a responsible official is as follows:

For a corporation:

- Corporate officer
- Other person in charge of a principal business function
- Duly authorized representative responsible for overall operation of a source (plant manager) if either:
 - 250 persons employed or \$25 million in sales or expenditures
 - delegation of authority approved in advance

For a partnership: A general partner.

For a sole proprietorship: The proprietor

For a government agency:

- Principal executive officer
- Ranking elected official

CERTIFIED PROGRESS REPORT FORM 9420-N

EMISSION UNIT # _____
EMISSION POINT # _____

CERTIFIED PROGRESS REPORT Reporting Period ____/____/____ to ____/____/____	FOR DISTRICT USE ONLY
	EIS NO: _____
	PERMIT NO: _____
	DATE RECEIVED: _____

This form must be completed for each item of equipment constructed or modified in accordance with a **FEDERALLY ENFORCEABLE DISTRICT-ORIGIN Compliance Schedule Form 9420-M**, pursuant to District Regulation 2.16.

SOURCE INFORMATION	
1) Source Name: _____	
2) Source Street Address: _____	
3) City: _____	4) Date Form Prepared: _____
5) Construction Permit No.: _____ (if applicable)	
6) Identify the emission unit being constructed or modified: _____	
7) Identify the unique designation of the emission unit as given on the applicable plot plan in the application on file with the District: _____	
8) Describe activities during reporting period leading to compliance, including dates when activities were completed: _____	

9A) Milestones identified in FEDERALLY ENFORCEABLE DISTRICT-ORIGIN application to be completed during this reporting period or actually completed during this reporting period:		
Milestone	Scheduled Completion Date	Actual Completion Date, if completed
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /

CERTIFIED PROGRESS REPORT FORM 9420-N (Continued)

b) Explanation why scheduled dates for milestones were not met, if any, including preventive or corrective measure(s) adopted:

10A) Future milestones identified in FEDERALLY ENFORCEABLE DISTRICT-ORIGIN application which will not or may not be met, if any:

Milestone	Scheduled Completion Date	Anticipated Completion Date
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /
	/ /	/ /

B) Explanation why scheduled dates may or will not be met, including preventive or corrective measure(s) adopted:

SIGNATURE BLOCK FOR RESPONSIBLE OFFICIAL	
<p>11) Based on information and belief formed after reasonable inquiry, I certify that the statements and information in this document are true, accurate, and complete.</p> <p>BY: _____</p> <div style="display: flex; justify-content: space-between; width: 80%; margin: 0 auto;"> <div style="text-align: center; width: 45%;"> <p style="font-size: small;">Authorized Signature</p> </div> <div style="text-align: center; width: 45%;"> <p style="font-size: small;">Date</p> </div> </div> <div style="display: flex; justify-content: space-between; width: 80%; margin-top: 10px;"> <div style="text-align: center; width: 45%;"> <p style="font-size: small;">Typed or Printed Name of Signatory</p> </div> <div style="text-align: center; width: 45%;"> <p style="font-size: small;">Title of Signatory</p> </div> </div>	

INSTRUCTIONS FOR FORM 9420-O COMPLIANCE CERTIFICATION

PURPOSE

The application for a federally enforceable District-origin operating permit must contain a compliance certification signed by a responsible official. This form must be used for this compliance certification. It must be submitted with the original permit application as well as each annual report. The annual report will be due each year by April 15.

Note: Items which are self explanatory are not addressed.

Source Information: This information should be identical to the information stated in Form 9420-A.

- 1) **Source Name:** The company name, or specific plant name if different from the company name, must be provided.
- 2) **Source Street Address:** This must be the actual street address of the source. P.O. boxes are not acceptable.
- 5) **Permit No.:** This is the permit number assigned to the application for the permit for the source, by the District.
- 6) **Reporting Period:** If this form is being submitted as part of an annual report, the reporting period must be provided.

IDENTIFICATION OF EMISSION UNITS

All emission units at this source must be provided, as well as the compliance status, the applicable regulation, and methods of compliance.

- 7a) All emission units that are in compliance at all times with all applicable requirements must be provided in this space. An example would be:

<u>Emission Unit No.</u>	<u>Emission Point No.</u>	<u>Applicable Regulation</u>	<u>Compliance Method</u>
U3	E1	7.78	Stack test of particulate emission performed. Stack test for CO emissions performed.

- 7b) All emission units that are not in continuous compliance with all applicable requirements since the last reporting period must be provided in this space along with the requirement(s) that the unit is out of compliance with and the reason(s) for noncompliance. An example would be:

<u>Emission Unit No.</u>	<u>Reason(s) for Noncompliance</u>
U4	Nitrogen content of oil was not recorded during the past year as required by 40 CFR 60.49b(e). This was a mistake by the operator of the unit.

COMPLIANCE INFORMATION

For each emission unit at the source, regardless of compliance status, the methods used to determine compliance must be provided.

- 8a) An example of a testing method used to demonstrate compliance would be:
Particulate Matter Stack Test Method U.S. EPA Method 5 – Incinerator U3.

COMPLIANCE CERTIFICATION

(Continued)

- 8b) An example of a monitoring procedure used to demonstrate compliance would be:
Continuous Opacity Monitor - U4, Boiler #4.
- 8c) An example of recordkeeping used to demonstrate compliance would be:
Nitrogen content of oil - U4, Boiler #4.
- 8d) An example of reporting used to demonstrate compliance would be:
Annual report of all specified air contaminants, all emission units at source.

SIGNATURE BLOCK:

- 9) The application must be signed by a responsible official of the source and dated. In general, a responsible official is as follows:

For a corporation:

- Corporate officer
- Other person in charge of a principal business function
- Duly authorized representative responsible for overall operation of a source (plant manager) if either:
 - 250 persons employed or \$25 million in sales or expenditures
 - Delegation of authority approved in advance

For a partnership: A general partner.

For a sole proprietorship: The proprietor

For a government agency:

- Principal executive officer
- Ranking elected official

COMPLIANCE CERTIFICATION

EIS NO:

PERMIT NO:

DATE RECEIVED:

SOURCE INFORMATION

1) Source Name:	
-----------------	--

2) Source Street Address:	
---------------------------	--

3) City:

4) Date Form Prepared:

5) FEDOOP Permit No. (If known):

6) Is this the first submittal of this form?

☐ Yes☐ No

If no, what is the reporting period?

_____ / _____ to _____ / _____

7a) The following emission units are in compliance with applicable requirements such as emission standards, emission control requirements, emission testing, court requirements, work practices, or enhanced monitoring, based on the compliance methods specified below: (if additional space is needed, attach and label as exhibit _____).

EMISSION UNIT
NO.

EMISSION POINT
NO.

APPLICABLE REGULATION

COMPLIANCE METHOD

B) List the emission units that were not in compliance since the last reporting period, along with the reason(s) for noncompliance: (if additional space is needed, attach and label as exhibit _____).

EMISSION UNIT NO.

REASON(S) FOR NONCOMPLIANCE

COMPLIANCE CERTIFICATION
FORM 9420-O
(Continued)

COMPLIANCE INFORMATION
8) Summary of Methods Used to Determine Compliance:
A) Description of testing methods used to demonstrate compliance:
B) Description of monitoring procedures used to demonstrate compliance, including any enhanced monitoring requirements of the Act:
C) Description of recordkeeping used to demonstrate compliance:
D) Description of reporting used to demonstrate compliance:

SIGNATURE BLOCK FOR RESPONSIBLE OFFICIAL	
11) Based on information and belief formed after reasonable inquiry, I certify that the statements and information in this document are true, accurate, and complete.	
BY: _____	
Authorized Signature	_____
	Date
_____	_____
Typed or Printed Name of Signatory	Title of Signatory

SECTION 112(R) RISK MANAGEMENT PLAN FORM 9420-P

Under Section 112(r) of the Clean Air Act Amendments of 1990, any source that manufactures, processes, uses, stores, or otherwise handles regulated substances listed in 40 CFR 68 Subpart C in quantities that exceed a specified threshold to develop and implement a Risk Management Plan (RMP) pursuant to 40 CFR 68 Subpart B. The following questions must be answered and made part of your permit application submittal to the District.

Are you required to register a RMP pursuant to 40 CFR 68 Subpart B?

☐ YES ☐ NO

If you are required to submit a RMP, have you submitted it to the implementing agency?

☐ YES ☐ NO

If so, indicate the submittal date below.

/ /

If not, please provide the anticipated submittal date and a brief explanation as to why the submittal has not been made.

Anticipated Submittal Date:

/ /

Has the RMP submittal been reviewed?

☐ YES ☐ NO

Were any changes suggested?

☐ YES ☐ NO

Have the suggested changes (if any) been made to the RMP?

☐ YES ☐ NO

If the answer is no, please provide a brief summary of what was identified as requiring changes.

**FEDERALLY ENFORCEABLE DISTRICT-ORIGIN
INSTRUCTIONS
FOR FORM 9420-Q
EMISSION REDUCTION CREDIT**

- 1) Enter the **Full Business Name** of plant (the name to which the permit is issued).
- 2) **Street Address** at which the source is located.
- 3) Check which **Pollutant** is being submitted for the Emission Reduction Credit. (Submit one form per pollutant.)
- 4) Enter the **Date** the reduction occurred.
- 5) Enter the **Emission Point Number** as listed on the completed Form 9420-B2.
- 6) List **Emission Unit Name, Emission Unit ID, and Process Description** as listed on Form 9420-B1.
- 7) Enter **Maximum Operating Rate** from Form 9420-B4 (units per hour), then list units per hour before and after the Emission Reduction Credit.
- 8) Enter the **Maximum Annual Throughput** from Form 9420-B4 (units per year), then list units per year before and after the Emission Reduction Credit.
- 9) Enter the **Reason** for the emission reduction and supply all necessary calculations on a separate attachment.
- 10) Insert **Emissions (TPY) Before Reduction**.
- 11) Insert **Emissions (TPY) After Reduction**.
- 12) Insert the **Difference To Be Banked**.
- 13) Enter all pertinent data from Form 9420-C1 through Form 9420-C9.
- 14) Enter **New Daily/Annual Emission Rate**.
- 15) Enter any other data that may assist in the evaluation of the Emission Reduction Credit request.

EMISSION REDUCTION CREDIT FORM 9420-Q

1) Company Name		
2) Address		
3) Emission Reduction Credit (ERC) for Pollutant: (check one) _____ PM _____ CO _____ VOC _____ NOx _____ Pb _____ SO ₂		
4) Effective Date of Reduction:	5) Emission Point Number:	
6) Process Description		
7) Maximum Operating Rate	Before ERC Specify Units	After ERC Specify Units
8) Maximum Annual Throughput	Before ERC Specify Units	After ERC Specify Units
9) Reason for emission reduction (Control efficiency increase, production rate decrease, etc.)		
10) Emission Before Reduction: <div style="text-align: center;">tons/yr</div>	11) Emission After Reduction: <div style="text-align: center;">tons/yr</div>	12) Emission to Be Banked: <div style="text-align: center;">tons/yr</div>
13) Process Parameters: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> a) Stack Height _____ ft. b) Stack Diameter _____ ft. c) Exit Gas Velocity _____ ft/sec f) List any Hazardous Materials (as specified in 40 CFR 60 App. VIII) </div> <div style="width: 45%;"> d) Exit Gas Temperature _____ °F e) Particle size (if app.) _____ μm </div> </div>		
14) Emission Rate (after ERC): <div style="display: flex; justify-content: space-between;">lb/dayton/year</div>		
15) Other Pertinent Data (if applicable)		

INSTRUCTIONS FOR FORM 9420-R1 EPISODE STANDBY PLAN

Pursuant to District Regulation 4.03, Section 2(a), each affected source is required to submit emergency episode plans. (40 CFR 60 51 Subpart H, and Appendix L).

- 1) **Source Name:** Insert source name as on Form 9420-A.
- 2) **Source Location:** Insert physical location as on Form 9420-A.
- 3) **Person to Contact Regarding an Air Pollution Episode:** Supply information of person to contact who has the authority to institute the plans supplied to the District on Form 9420-R3, Form 9420-R4, and Form 9420-R5.
- 4) Supply the name and other information for an alternative individual with the same vested authority to act as stated above.

EPISODE STANDBY PLAN FORM 9420-R1

1) SOURCE NAME: _____ _____
2) SOURCE LOCATION: Street: _____ City: _____
3) PERSON TO CONTACT REGARDING AN AIR POLLUTION EPISODE: Name: _____ Title: _____ Office Telephone: _____ Office E-Mail: _____ Home Telephone: _____
4) ALTERNATE PERSON TO CONTACT: Name: _____ Title: _____ Office Telephone: _____ Office E-Mail: _____ Home Telephone: _____

Page ____ of ____

**INSTRUCTIONS
FOR FORM 9420-R2
GENERAL SOURCE INFORMATION**

Complete this form using the same information as supplied on Form 9420-B2, Form 9420-E, and Form 9420-H.

Page ____ of ____

[illegible]

**INSTRUCTIONS
FOR FORM 9420-R3
EPISODE STANDBY PLAN ALERT LEVEL**

Complete this form for action pursuant to:

**Regulation 4.03 Section 3,
Regulation 4.04 Section 1,
Regulation 4.05 Section 1, and
Regulation 4.06 Section 1.**

And report pursuant to **Regulation 4.07.**

Page ____ of ____

[illegible]

**INSTRUCTIONS
FOR FORM 9420-R4
EPISODE STANDBY PLAN WARNING LEVEL**

Complete this form for action pursuant to:

**Regulation 4.03 Section 4,
Regulation 4.04 Section 2,
Regulation 4.05 Section 2, and
Regulation 4.06 Section 2.**

And report pursuant to **Regulation 4.07.**

Page ____ of ____

[illegible]

**INSTRUCTIONS
FOR FORM 9420-R5
EPISODE STANDBY PLAN EMERGENCY LEVEL**

Complete this form for action pursuant to:

**Regulation 4.03 Section 5,
Regulation 4.04 Section 3,
Regulation 4.05 Section 3, and
Regulation 4.06 Section 3.**

And report pursuant to **Regulation 4.07.**

Page ____ of ____

Emission
Point
Number